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(Re	questor's Name)	
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PICK-UP	MAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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COVER LETTER

TO:

FO: Registration Se Division of Cos			
SURJECT:	Nest Home	Management, LLC ited Liability Company	
	Name of Lim	ited Liability Company	
The englaced Activise of	Amendment and fee(s) are sub	writted for filing	
	ondence concerning this matter	-	
		yan McKee Name of Person	
		- Home Management Firm/Company	
	21340	6 Saint Andrews Blud Suite 4: Address	
	Boca	. Retm, +L 33433	
	inf	City/State and Zip Code O West Lome Management, com to be used for future annual report notification)	
Confunthan information o	E-mail address: (concerning this matter, please concerning this matter)		
Name o	of Person	at (561) Daytime Telephone Number	
Enclosed is a check for the	he following amount:		
\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
<u>Mailing Addres</u>	15 ;	Street Address:	
Registration !	Section	Registration Section	
Division of C	•	Division of Corporations	
P.O. Box 632		The Centre of Tallahassee	
Tallahassee,	rl <i>323</i> 14	2415 N. Monroe Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nest Ho (Name of the Limited)	me ma	anagent	, Llc		
(Name of the Limited (A	Liability Company a Florida Limited Liab	s it now appears on lity Company)	our records.)		
The Articles of Organization for this Limited Liab Florida document number <u>しゅぎゅっぷるし</u>	ility Company we	re filed on	8006/66/	and assign	ned
This amendment is submitted to amend the following	ing:				
A. If amending name, enter the new name of th	e limited liability	company here:			
The new name must be distinguishable and contain the word	ls "Limited Liability (Company," the design	nation "LLC" or the abbr	reviation "L.L.C	
Enter new principal offices address, if applicable	le: _				
(<u>Principal office address MUST BE A STREET A</u>	<u>ADDRESS)</u>		<u> </u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO					
B. If amending the registered agent and/or regi agent and/or the new registered office address h	stered office add nere:	ress on our recor	the senter the name Kee Wrees Blvd Irees address , Florida	of the new r	egistered
Name of New Registered Agent:	h	-yan Ma	kee		<u>.</u>
New Registered Office Address:	21346	Saint A	udreus Blud	Suite	430
	Boss	Enter Florida s	treet address Florida	空 3343更	
-	· · · · · · · · ·	City	, 1 1011444	Zip Code)

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Title** <u>Address</u> Type of Action <u>Name</u> 2819 Barrin Blid Cil NW DAdd Mark Neston MGR Buca Retm, fl 33431 MRemove Change Mar Ronald Lamb 454 Capistrano Drive MAdd Palm Beach Gordens fl 33410 Remove □ Change ____ □Remove ____ Change □Remove _____ Change □ Remove ______ □Change _ □Remove

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<u>te:</u> If the oument's e	date inserted ffective date	l in this block do on the Departm	es not me ent of Sta	et the appliate's record	icable statut ls.	ory filing re	quirements,	this date will	not be asted as
cord speci	fies a delaye	ed effective date,	but not a	n effective	time, at 12:0	01 a.m. on t	he earlier of	(b) The 90t	h day after the
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Filing Fee: \$25.00