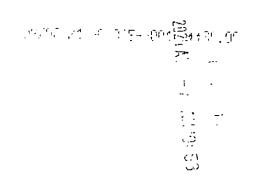
10900051626

	(Requestor's Name)
	(Address)
	(Address)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
	(Document Number)
Certified Copies	Certificates of Status
Special Instructions to	Filing Officer:
	J. HORNE
	AUG - 8 2024
	

Office Use Only



200434194212



© TALLAMASSEE, FLURIDA (

COVER LETTER

	Registration Se Division of Cor			
SUBJEC	NOVAGIL	ITY, LLC		
SUBJEC	JI;	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Paula M. Sparkman		
			Name of Person	
		Messer Caparello, P.A.		
			Firm/Company	
		2618 Centennial Place		
			Address	
		Tallahassee, Florida 32309)	
			City/State and Zip Code	
		blloyd@novagility.com	to be used for future annual report	natitional
For furth	er information c	oncerning this matter, please c	·	notification;
Paula M	. Sparkman		850 222-072	0
	Name o	f Person	at () Area Code Da	ytime Telephone Number
Enclosed	l is a check for ti	ne following amount:		
□ \$2 5.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address Registration	
Division of Corporations		Division of	Corporations	
P.O. Box 6327		.7	The Centre of	of Tallahassee

Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20217. - 7110:59

NOVAGILITY, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company v. Florida document number $\frac{L09000051626}{L09000051626}$	vere filed on 05/28/2009	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office acagent and/or the new registered office address here:	dress on our records, <u>enter the na</u>	ame of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	Ziv Code
New Registered Agent's Signature, if changing Registered Agent:	w.	Top Com
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr	erformance of my duties, and I ar	m familiar with and

being filed to merely reflect a change in the registered office address. I hereby confirm that the limited liability

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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Tenants By the Entirety Brian_Victor_Lloyd	5116 Bird Nest Trail, Tallahassee, FL 32312	≡ Add
			□ Remove
			Change
AMBR Tenants By the Entirety Sheena_Ross_Lloyd		5116 Bird Nest Trail, Tallahassee, FL 32312	= Add
		□ Remove	
			□ Change
			🗆 Add
		□ Remove	
			□ Change
			🗆 Add
		□Remove	
		□ Change	
			□ Add
		□Remove	
		Change	
			□ Add
			Remove
			□ Change

). If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
.	
	
	
Note: If the	date, if other than the date of filing:
the record spe cord is filed.	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Frank 167 . 2024.
-	Signature of a member or authorized representative of a member
	Brian Victor Lloyd
-	Typed or printed name of signee

Filing Fee: \$25.00