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# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: ND Property Ventures LLC Name of Limited Liability Company
Name of Danied Dabiniy Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Mick D'Andola Name of Person
NO Property Ventures LCC Firm/Company
5278 Sw Longspur Lane
Palm City FL 34990  City/State and Zip Code  dan dola 2 comcast . net  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Nick D'Andolg at 772 324-8618  Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certificate of Status}\$\$ \$55.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$ \$60.00 Filing Fee. \$\text{Certified Copy} \\ \text{Certified Copy} \\ \text{(additional copy is enclosed)}\$\$

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

## STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SECRETARY OF STATE DIVISION OF CORPORATIONS

11 MAR -7 PH 3 04

ND Property (Name of the Limited L.) (AF	Ventures	LLC
( <u>Name of the Limited L</u> (A F	iability Company as it now app lorida Limited Liability Compan	ears on our records.)
The Articles of Organization for this Limited Liab Florida document number <u>L 11 0000 22</u>		2 2 2 3 1 1 and assigned
This amendment is submitted to amend the follow	ring;	
A. If amending name, <u>enter the new name of t</u> l	ne limited liability company	nere:
The new name must be distinguishable and end with talk C."	he words "Limited Liability Cor	npany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET.	ADDRESS)	
	<del></del>	
Enter new mailing address, if applicable:		
Muiling address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or registered agent and/or the new registered offic		n our records, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		Enter Florida street address
	City	Florida 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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action** Title Title **Name** Address Melissa D'Andola MG RM 5278 Sw Longspur Lane **⊠** ∆dd Remove ☐ Add Remove  $\prod \Lambda dd$ ☐ Remove Remove  $\square \wedge dd$ Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2011 Dated\_ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00