

L110000060951

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

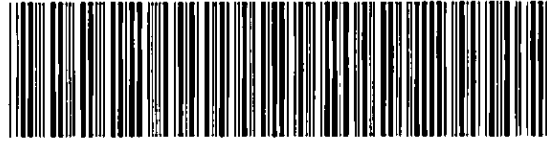
Special Instructions to Filing Officer:

RA must be active in our records.

10/13 Brandon called about his Registered Agent. Registered Agent is a Fictitious

R Name. AB 10/14/22

Office Use Only



000395148720

FILED

2022 OCT 10 AM 6:42

SECRETARY OF STATE
TALLAHASSEE, FL

RECEIVED

2022 OCT 10 PM 3:47

ATTORNEY GENERAL
TALLAHASSEE, FL

A. BUTLER

OCT 14 2022

FLORIDA CAPITAL COURIER SERVICES, INC
2330 CLARE DRIVE
TALLAHASSEE, FL 32309
(850) 524-5437
(850) 524-6243

Please use funds from account: 120210000160 Amount: paid: \$25.00

Authorization Signature

NYAMBOSE, LLC L11000060951

Business Name

Document #

WILL WAIT

☐ Photocopy

☐ Certified Copy (s) Articles of Organization

☐ Certificate of Status

NEW FILINGS

☐ FOR Profit
☐ Not for Profit
☐ Limited Liability
☐ Domestication
☐ Other
☐ **CORP**

☐ LLLP

OTHER FILINGS

☐ Annual Report

☐ Fictitious Name

☐ ARTICLES OF CORRECTION

☐ APOSTIL ()

Country

AMMENDMENTS

☒ Amendment
☐ Resignation of R.A. or Officer/Director
☐ Change of Registered Agent
☐ Revocation of Dissolution
☐ Merger
☐ **Conversion**
☐ Articles of Conversion
☐ Resignation

REGISTRATION/QUALIFICATIONS

☐ Foreign filing
☐ Limited Partnership

☐ Reinstatement

☐ Other

EXAMINER'S INITIALS: _____

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NYAMBOSE, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Brandon V. Woodward, Esq.

Name of Person

Woodward, Kelley, Fulton & Kaplan

Firm/Company

10 SE Central Parkway, Suite 450

Address

Stuart, FL 34994

City/State and Zip Code

THEDOYENCOMPANY@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Brandon V. Woodward, Esq.

772 497-6544
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

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

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED

2022 OCT 10 AM 6:42

SECRET OF STATE
TALLAHASSEE, FL

NYAMBOSE, LLC

(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 were filed on 05/23/2011 and assigned
Florida document number L11000060951

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

111 ORANGE AVENUE, SUITE 319

(Principal office address MUST BE A STREET ADDRESS)

FT. PIERCE, FL 34950

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Woodward, Kelley, Fulton, & Kaplan

New Registered Office Address:

10 SE Central Parkway, Suite 450

Enter Florida street address

Stuart

City

Florida 34994

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

MGR = Manager
AMBR = Authorized Member

AMBR = Authorized Member

[illegible]

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 10/10 2022
[Signature]
 Signature of a member or authorized

Signature of a member or authorized representative of a member

Brandon V. Woodward, Esq.

Typed or printed name of signee

Filing Fee: \$25.00



FLORIDA DEPARTMENT OF STATE
Division of Corporations

October 11, 2022

FLORIDA CAPITAL COURIER SERVICES, INC

Ref. Number: L1100060951

We have received your document for and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent designated must be an active Florida entity or a foreign entity authorized to transact business in Florida. Please correct the document.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler
Regulatory Specialist II

Letter Number: 022A00022689