## L11000061158

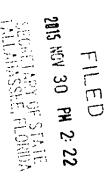
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## **COVER LETTER**

TO: Registration Sec Division of Corp	porations	
NASPI LLC SUBJECT:		
SUBJECT.	Name of Limited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are submitted for filing.	
Please return all correspon	ndence concerning this matter to the following:	
	JOSEPH H. HUPPERT	
	Name of Person	
	Firm/Company	
	17611 SW 48 STREET	
	Address	
• • • • •	SOUTHWEST RANCHES FL 33331	
	City/State and Zip Code	
	JOE@HUPPERTCPA.COM	
CINDADOLE	E-mail address: (to be used for future annual report notification)	
For further information co	oncerning this matter, please call:	
JOSEPH H. HUPPERT	954 434-4811 at ()	
Name of	Person Area Code Daytime Telephone Number	
Enclosed is a check for the	e following amount:	
■ \$25.00 Filing Fee	Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)  Certified Copy (additional copy is enclosed)	of Status &

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

FILED 2015 NGV 30 PM 2: 23

SECRETARY OF STATE TALLAHASSEE, FLORIDA

Zip Code

NASPI 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 MAY 24, 2011  Florida document number L11000061158	and assigned
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 a	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:	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address on our records, enter registered agent and/or the new registered office address here:	the name of the nev
Name of New Registered Agent:	
New Registered Office Address:  Enter Florida street address	
Florida	

## 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	SALOMON ZRIHEN	17611 SW 48 STREET SOUTHWEST HANCHES FL 35.33	<u>l</u> ■ Add
			Remove
			Change
			Add
			Remove
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			Change
***************************************			🗆 Add
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			Remove
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
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		2015 NOV 30
NOV. 66 4015	芸芸	10V 3C
E. Effective date, if other than the date of filing: NOV. 25, 2015 (optional) (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	7 (3)(b)
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be document's effective date on the Department of State's records.	listed as	· · · · · · · · · · · · · · · · · · ·
	<u> </u>	23
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the ea (b) The 90th day after the record is filed.	irlier o	f:
Dated		
Signature of a member or authorized representative of a member	_	
JOSEPH HUPPERT		
Typed or printed name of signee	-	

Page 3 of 3

Filing Fee: \$25.00