

111000127790

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

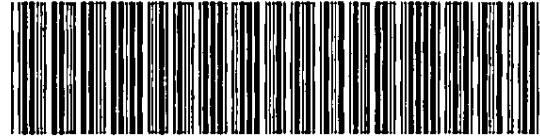
(Business Entity Name)

(Document Number)

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05/10/22--01010--006 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
22 MAY 10 AM 11:14

T. MATTHEWS

JUL -7 2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Nature's Reserve, 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:

Alexzander Gonano

Name of Person

Gonano & Harrell

Firm/Company

1600 S. Federal Hwy, Suite 200

Address

Fort Pierce, FL 34950

City/State and Zip Code

nationmotorsllc@gmail.com

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

For further information concerning this matter, please call:

Charles Legitime

954

200-5549

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
SECRETARY OF STATE
DIVISION OF CORPORATIONS

22 MAY 10 AM 11:14

Nature's Reserve 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 11/09/2011 and assigned
Florida document number L11000127790.

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:

501 North Dixie Hwy

(Principal office address MUST BE A STREET ADDRESS)

Lake Worth, FL 33460

Enter new mailing address, if applicable:

501 North Dixie Hwy

(Mailing address MAY BE A POST OFFICE BOX)

Lake Worth, FL 33460

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:

Charles Legitime

New Registered Office Address:

4945 Messina Ter

Enter Florida street address

Lake Worth

Florida

33463

City

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.

DocuSigned by:

Charles Legitime

889E27B1E19D4C6

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> | <u>Type of Action</u> |
|--------------|-------------------------------|---------------------------|--|
| MGR | Miami Auto & Truck Depot, LLC | 4945 Messina Ter | <input checked="" type="checkbox"/> Add |
| | | Lake Worth, FL 33463 | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| MGRM | Michael Louis D'Amelio | 6738 Wallis Rd | <input type="checkbox"/> Add |
| | | West Palm Beach, FL 33413 | <input checked="" type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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[illegible]

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 5/5/2022

DocuSigned by:
Charles Legitime
609E2731F19D466...

Charles Legitime

Typed or printed name of signee