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SECRETARY OF STATE
DIVISION OF CORPORATIONS

9919 NOV 15 AM II: 55

C. LEWIS NOV 1 6 2012 EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corpora		<b>%</b>	<b>⊹</b> •••	.*		
SUBJE	ECT: •	NAN	10 88 LLC				
777		Name of Limit	ed Liability Company		<del></del>		
The en	closed Articles of Ame	ndment and fee(s) are sub	mitted for filing.				
Please	return all corresponden	ce concerning this matter	to the following:				
	_	S <sup>-</sup>	TEVEN A. SPENC	ER			
			Name of Person				
		STEVEN A. SPENCER AND ASSOCIATES					
	_		Firm/Company				
		1900 E. ROBINSON ST.					
			Address				
OR			ANDO, FLORIDA	32803			
		City/State and Zip Code					
	_	<u> </u>					
For fur	ther information conce	rning this matter, please ca	o be used for future annual	Topon nomedany	,		
	STEVEN A	. SPENCER	at (_407 )_	894-	-0081		
Name of Person			Arca Coo	de & Daytime Telep	phone Number		
Enclos	ed is a check for the fol	lowing amount:					
<b>₹</b> \$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy	_	\$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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



2012 NOV 15 AM 11: 55

	NANO 88 LLC			
(Name of the Limited	Liability Company as it now appea Florida Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited L	iability Company were filed on	12/21/2011	and assigned	
Florida document number L11000143	3082			
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	f the limited liability company he	<u>re</u> :		
The new name must be distinguishable and end wit "L.L.C."	h the words "Limited Liability Comp	any," the designation "I	LC" or the abbreviation	
Enter new principal offices address, if applic	able:			
(Principal office address MUST BE A STREE	T ADDRESS)		<u> </u>	
Enton non-malling address (formling)				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u> </u>			
B. If amending the registered agent and/oregistered agent and/or the new registered of	or registered office address on fice address here:	our records, <u>enter t</u>	he name of the new	
Name of New Registered Agent:	<del>.</del>			
New Registered Office Address:	r.	etas Elasida etas eta ed		
	Enter Florida street address			
	City	, Florida	Zip Code	
	CHY		ZIP COUR	

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 amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title Name Address **Type of Action** MGRM SHARON MAZRAWI 3762 WINDING LAKE CIRCLE ☐ Add ORLANDO, FLORIDA 32835 ✓ Remove MGRM SEAN MAZRAWI 3762 WINDING LAKE CIRCLE ✓ Add ORLANDO, FLORIDA 32835 Remove □ Add Remove ☐ Add Remove  $\square$ Add Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) **JUNE 30** 2012 Signature of a member or authorized representative of a member STEVEN A. SPENCER Typed or printed name of signee

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Filing Fee: \$25.00