L12000013643

(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phon	ne #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number)
Certified Copies	_ Certificate	s of Status
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FLORIDA DEPARTMENT OF STATE Division of Corporations

October 8, 2015

NILSON DIZEU JR 6530 STOLLER AVENUE WINDERMERE, FL 34786

SUBJECT: NILSON V DIZEU JR., LLC

Ref. Number: L12000013643

We have received your document for NILSON V DIZEU JR., LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION - INC, but your entity is a LIMITED LIABILITY COMPANY - LLC. Please complete and return the enclosed blank form(s).

You may comply with this request via fax. Please fax correction(s) to the attention of the undersigned examiner at 850-245-6030.

Please return 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) 245-6051.

Stacey M Mason Regulatory Specialist II

Letter Number: 815A00021384

COVER LETTER

TO: Registration Sec Division of Corp			
NILSON V SUBJECT:	DIZEU JR LLC		
	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspon	ndence concerning this matter to	o the following:	
	NILSON V DIZEU JR		
	· · ·	Name of Person	
	NILSON V DIZEU JR LLC		
		Firm/Company	
	6530 STOLLER AVE		
		Address	
	WINDERMERE, FL 34786		
		City/State and Zip Code	
	DIZEUN@HOTMAIL.COM	be used for future annual report notific	
		·	cation)
For further information co	oncerning this matter, please cal	ll:	
NILSON V DIZEU JR		407 433-8713	
Name of	Person	at () Area Code Daytime 7	Telephone Number
Enclosed is a check for the	e 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/COURIER ADDRESS:

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NILSON V DIZEU JR LLC	
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L12000013643</u> This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ullity company here:
A. If amending name, enter the new name of the infined hab	mry company nere.
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6530 STOLLER AVE
(Principal office address MUST BE A STREET ADDRESS)	WINDERMERE, FL 34786
Enter new mailing address, if applicable:	6530 STOLLER AVE
(Mailing address MAY BE A POST OFFICE BOX)	WINDERMERE, FL 34786
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
New Registered Agent's Signature, if changing Registered Agent:	03
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pubeing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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>	Address	Type of Action
MGR	NILSON DIZEU JR	6530 STOLLER AVE	
		WINDERMERE, FL 34786	□ Remove
		 	Change
<u> </u>			☐ Add
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