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## **COVER LETTER**

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er in trees		NE HOLDINGS, LLC						
Name of Limited Liability Company								
The enclos	sed Articles of .	Amendment and fee(s) are sub	mitted for filing.					
Please retu	ırn all correspo	ndence concerning this matter	to the following:					
		LUIZ F MACHADO						
		LANDMARK INVESTME	Name of Person ENTS & REAL ESTATE, INC.					
Firm/Company 333 SOUTHERN BLVD SUITE 304								
		WEST PALM BEACH, FI	Address . 33405					
		luizmachado2@gmail.com	City/State and Zip Code	<del></del>				
		E-mail address: (	to be used for future annual report notif	ication)				
For further	r information co	oncerning this matter, please ea	all:					
LUIZ F M	IACHADO		561 727-8511 at ()					
	Name of	Person	Area Code Daytime	: Telephone Number				
Enclosed i	s a check for th	e following amount:						
<b>■</b> \$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 & Contified Copy (additional copy is enclosed)				

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on outed Liability Company)	r records.)
The Articles of Organization for this Limited Liability Comp	any were filed on	and assigned
Florida document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	liability company here:	
The new name must be distinguishable and contain the words "Limited L	iability Company," the designation	on "LI.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		(a)
Enter new mailing address, if applicable:		· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		22 2
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		records, <u>enter the name of the ne</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et address
		Florida
	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.

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	LUIZ FILIPE DE NIEMEYER ARMSTRONG	333 Southern Blvd Suite # 304, West Palm Beach, FL 33405	<b>=</b> Add
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			☐ Change
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E. Effective date, if	other than the date	01/31/2019 of filing:	(opt	ional)
Note: If the date	inserted in this block d	pecific and cannot be prior to de oes not meet the applicable ment of State's records.	(opt ite of filing or more than 90 days afte statutory filing requirements, th	r filing.) Pursuant to 605.0207 (3)(is date will not be listed as the
	ifies a delayed effer after the record i		effective time, at 12:01	a.m. on the earlier of:
Dated	I	2019		
,			D	
		6	I representative of a member	

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Typed or printed name of signee

Filing Fee: \$25.00