<u>U1400006733</u>

(Re	equestor's Name)	
(Ad	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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(Bu	usiness Entity Nar	me)
(Do	ocument Number)	
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COVER LETTER

	gistration Sect vision of Corp			
SUBJECT:	NANDE LLC			
SUBJECT:	 	Name of Lim	ited Liability Company	
The enclosed	d Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return	all correspond	dence concerning this matter	to the following:	
		NatalieCisneros		
			Name of Person	
		NANDE LLC DBA Jekyl	l Works	
			Firm/Company	
		1461Rockledge		
			Address	
		RockledgeFlorida3295		
			City/State and Zip Code	
		natalie@jekyllworks		
		E-mail address; (to be used for future annual report notific	ation)
For further in	nformation cor	ncerning this matter, please ca	all:	
NatalieCis	neros		352 219-7579 at ()	
	Name of I	Person		Геlephone Number
Enclosed is a	a check for the	following amount:		
\$25.00 F	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

ity Company as it now appears on our records.) a Limited Liability Company)	
Company were filed on Januaryl 3, 2014	and assigned
nited liability company here:	
nited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
RESS)	
	20 5 JH
stered office address on our records, <u>s</u> <u>lress here</u> :	enter the name of the her
Enter Florida street address	
, Floric	da
City	Zip Code
	ited liability company here: ited liability company here: ited Liability Company," the designation "LLC" or RESS) stered office address on our records, gress here: 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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

Title	<u>Name</u>	Address	Type of Action
			□ Add
			□ Remove
			Change
			□ Add
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			☐ Change

Effective Monday, June 15, 2015, the AMBR's of NANDE L	LC agreed to name Natalie Cisneros
as the President of the company, and Robert Brown as Vice	President. In addition,this amendment
reflects 51% ownership of the company to Natalie Cisneros.	and 49% to RobertBrown.
	
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	<u> </u>
fective date, if other than the date of filing: In effective date is listed, the date must be specific and cannot be prior to date ote: If the date inserted in this block does not meet the applicable structurent's effective date on the Department of State's records.	atutory filing requirements, this date will not be listed a
record specifies a delayed effective date, but not an e The 90th day after the record is filed.	effective time, at 12:01 a.m. on the earlier of
MondayJune15 2015	www. wisheld
Signature of a member or authorized r	

Page 3 of 3

Filing Fee: \$25.00