1/400044/69

| (Re | questor's Name) | |
|-------------------------|-------------------|-------------|
| (Ad | dress) | |
| (Ad | dress) | ···· |
| (Cit | y/State/Zip/Phon | e #) |
| PICK-UP | ☐ WAIT | MAiL |
| (Bu | siness Entity Nar | me) |
| (Do | cument Number) | 1 |
| Certified Copies | _ Certificate | s of Status |
| Special Instructions to | Filing Officer: | |
| | | |
| | | |
| | | |

Office Use Only



200308952372

02/12/18--01033--021 **55.00

18 FEB 12 PM 2: 10

O SIMMONS FEB 1 3 2019

COVER LETTER

| Division of Co | prporations | | | | | | |
|-----------------------------------|--|--|--|--|--|--|--|
| Nervana. | LLC | | | | | | |
| Name of Limited Liability Company | | | | | | | |
| The enclosed Articles o | f Amendment and fee(s) are submitted for filing. | | | | | | |
| Please return all corresp | condence concerning this matter to the following: | | | | | | |
| | Michael Karsch | | | | | | |
| | Name of Person | | | | | | |
| | Rice Pugatch Robinson Storfer & Cohen, PLLC | | | | | | |
| | Firm/Company | | | | | | |
| | 101 NE Third Avenue, Suite 1800 | | | | | | |
| | Address | | | | | | |
| | Fort Lauderdale, FL 33301 | | | | | | |
| | City/State and Zip Code | | | | | | |
| | E-mail address: (to be used for future annual report notification) | | | | | | |
| For further information | concerning this matter, please call: | | | | | | |
| Michael Karsch | 561 338-7090 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 S55.00 Filing Fee & Certificate of Status & Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) | | | | | | |

MAILING ADDRESS:

TO:

Registration Section

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

| Nervana, LLC | | |
|--|---|-------------------------|
| (Name of the Limited Liability Com (A Florida Limite | pany as it now appears on our records.) d Liability Company) | |
| The Articles of Organization for this Limited Liability Compar | ny were filed on March 17, 2014 | and assigned |
| Florida document number | | |
| This amendment is submitted to amend the following: | | |
| A. If amending name, enter the new name of the limited lis | ability company here: | |
| Neuvana, LLC | | _ |
| The new name must be distinguishable and contain the words "Limited Lia | bility Company," the designation "LLC" or the | ne abbreviation "LL.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADDRESS) | | 2 |
| Enter new mailing address, if applicable: | Fairway Financial Center | 2:10 |
| (Mailing address MAY BE A POST OFFICE BOX) | 10 Fairway Drive, Suite 200 | |
| Manning wantess MAT BE A TOST OF FICE BOAY | Deerfield Beach, FL 33441 | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address have a Name of New Registered Agent: | · — | ter the name of the no |
| New Registered Office Address: | | |
| | Enter Florida street address | |
| | , Florida | |
| | City | Zip Code |

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 | John Marino | 35 N. River Road | Add |
| | | Stuart, FL 34996 | □ Remove |
| | | | ☐ Change |
| MGR | Warren Orlando | 21731 Frontenac Court | Add |
| | | Boca Raton, FL 33433 | Remove |
| | | | ☐ Change |
| MGR | Vincent C. Manopoli | 19314 King Palm Court | Add |
| | | Boca Raton, FL 33498 | Remove |
| | | | ☐ Change |
| | | | © Remove |
| | | | ☐ Change |
| | | | □ Remove |
| | | | □ Change |
| | | | □ Add |
| | | | □ Remove |
| | | | ☐ Change |

| | | | | | | | | | | _ |
|---------------------------------|---------------------------------------|---|------------------------|-----------------|----------------------------------|--------------|---------------------------------------|--------|---------------------------------------|-------------------|
| | | | | , , | | , | | | | |
| | | | | <u>.</u> | | | • | | | |
| | | | | | | | | | | — |
| | | | | | | | | | | — |
| | | | | | | ., | | | | • |
| | | . | | | | | | | | <u>8</u> 6E£ |
| | | | | | | | | | · · · · · · · · · · · · · · · · · · · | 3/12 |
| - | | | | | | | | | \$ | - P. |
| | | | | | | · | | | es. | 7: 10 - - |
| | | | • | | | | <u>.</u> | | | |
| ****** | | | | | | | | | | |
| | | | | <u>.</u> | | | | | | _ |
| | | | | | | | | | | |
| | | | | | | | | | | |
| | | | | | | | · · · · · · · · · · · · · · · · · · · | | | |
| n effectiv o te: If t | ve date is listed, he date inserte | than the date the date must be sp d in this block do to on the Departn | ecific and ones not me | cannot be price | or to date of fi cable statut | ling or more | than 90 days | |) Pursuant to | |
| | | a delayed effer the record is | | ite, but n | ot an effe | ctive tim | e, at 12:0 | 1 a.m. | on the ea | ırlier of |
| ted | Februa | <u> 2</u> | , | 2018 | · · | | | | | |
| | | Signa | C.7 | 11 ember or aut | O. | sentative of | member | | | - |
| | | | | | | | | | | |

Page 3 of 3

Filing Fee: \$25.00