L1500017821

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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18 JUN 25 PN 1: 34 SECRETARY OF STATE TALLAHASSEE, FLORIDA

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May 16, 2018

GINGER HANSON PO BOX 430473 BIG PINE KEY, FL 33043

SUBJECT: NAO HOMES LLC Ref. Number: L15000017821

We have received your document for NAO HOMES 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, but your entity is a LLC. Please complete and return the enclosed blank form(s).

We are enclosing the proper form(s) with instructions for your convenience.

Please return the corrected original and one copy of your document, along with 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.

Letter Number: 818A00010220

Justin M Shivers
Regulatory Specialist II Supervisor
Registration/Qualification Section

COVER LETTER

	Registration Division of C	Section Corporations	
011 n 111 0 7		omes LLC	
SUBJEC	Г:	Name of Limited Liability Company	
The enclo	sed Articles	of Amendment and fee(s) are submitted for filing.	
Please ret	urn all corre	spondence concerning this matter to the following:	
		Ginger Hanson	
		Name of Person	
		NAO Homes LLC	
		Firm/Company	
		PO Box 430473	
		Address	
		Big Pine Key, FL 33043	
		City/State and Zip Code	
		melroseheights12@gmail.com E-mail address: (to be used for future annual report notification)	
P. C. d.	· · · · · · · · · · · · · · · · · · ·	n concerning this matter, please call:	
Ginger H		786 537.4242 at () Area Code Daytime Telephone Number	_
	Nan	ne of Person Area Code Daytime Telephone Number	
Enclosed	is a check fo	or the following amount:	
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing F Certificate of Status	Status &

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

NAO Homes LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	ny as it now appears on our records Liability Company)	i.)
The Articles of Organization for this Limited Liability Company	were filed on 01/29/2015	and assigned
Florida document number L15000017821		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
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:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		FILED W 1: 34
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	;
	, Flo	orida
	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>	Address	Type of Action
MGR	James D. Hanson Jr.	PO Box 430473	
·		Big Pine Key, FL 33043	Remove
			Change
			☐ Remove
			Change
			SEGRETIAN OF PROPERTY OF
			P Change
			☐ Remove
			Change
			Add
			Remove
			Change
			Remove
			Change

					
	 				
					
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Effective date, if other (If an effective date is listed, the Note: If the date inserted document's effective date	e date must be specific in this block does n	and cannot be prior to ot meet the applicabl	date of filing or more than e statutory filing requir	(optional) 90 days after filing.) Pursuant to ements, this date will not be	o 605.0207 e listed as t
he record specifies a The 90th day after	delayed effective the record is file	ve date, but not a ed.	an effective time, a	t 12:01 a.m. on the e	arlier of
		2018			
Dated May 25		DUN-			
Dated May 25	Signature o	of a member or authoriz	red representative of a me	nber	_

Page 3 of 3

Filing Fee: \$25.00