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Amend

JUL 03 2019
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COVER LETTER

SUBJECT:	NICOLE VENDETTE	. LLC				
SUBJECT:		ited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.				
Please return all corresp	oundence concerning this matter	to the following:				
	Antoni	a L. Gentry, Esq., CPA				
		Name of Person				
	Antonia L. Gentry, PLLC					
		Firm/Company	<u> </u>			
	745 SE Port St Lucie Blvd					
	Address					
	Port St Lucie, FL 34984 City/State and Zip Code					
	TGentry@ToniLawCPA.com					
	E-mail address: (to be used for future annual report notifi	ication)			
For further information	concerning this matter, please c	all:				
Antonia L. Gentry		772 877-8008				
Name	of Person	at () Area Code Daytime	Telephone Number			
Enclosed is a check for	the 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

TO:

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:

10/20 Millo. 10 **OF** NICOLE VENDETTE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{08/01/2015}{1}$ and assigned Florida document number L15000129419 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.C." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Antonia L. Gentry, PLLC Name of New Registered Agent: 745 SE Port St Lucie Blvd New Registered Office Address: Enter Florida street address Port Saint Lucie

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Name	Address	Type of Action
MGR	Nicole Vendette	3344 NE SANDRA DR	-
		JENSEN BEACH 34957 UN	
			Remove
			☐ Change
MGR	Diana Macchia	3344 NE SANDRA DR	■ Add
		JENSEN BEACH 34957 UN	
			□ Remove
			☐ Change
		·	Add
			☐ Remove
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Dated	_)ua	e 17	L.	2019 - Coli	. ().	deli	Je.	
		,Sigi	nature of a me	mber or authoriz	red representative of	of a member		
		c Vendette						

Page 3 of 3

Filing Fee: \$25.00