L16000054002

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COVER LETTER

TO:									
SIERIE	NAMPE	H, LLC							
SUBJE		Name of Lin	nited Liability Company						
The en	closed Articles	of Amendment and fee(s) are sul	omitted for filing.						
			•						
		NICOLAS AARON MIR	SKY						
		Name of Person							
		NAMPBH, LLC							
	NICOLAS AARON MIRSKY Name of Person NAMPBH, LLC Firm/Company 900 BISCAYNE BLVD #4510 Address MIAMI, FL 33132 City/State and Zip Code MIRSKYA@OUTLOOK.COM E-mail address: (to be used for future annual report notification) further information concerning this matter, please call:								
	900 BISCAYNE BLVD #4510 Address MIAMI, FL 33132								
	Name of Person Name of Person NAMPBH, LLC Firm/Company 900 BISCAYNE BLVD #4510 Address MIAMI, FL 33132 City/State and Zip Code MIRSKYA@OUTLOOK.COM E-mail address: (to be used for future annual report notification) ther information concerning this matter, please call:								
	MIAMI, FL 33132								
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For furt	her informatio		•	incation)					
NICOL	AS A. MIRSI	Υ							
	Nan	e of Person		ne Telephone Number					
Enclose	d is a check fo	the following amount:							
■ \$25	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy					
	Reg Divi P.O.	stration Section sion of Corporations Box 6327	Registration Section Division of Corpo Clifton Building	on rations enter Circle					

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

SECTION OF STATE

NAMEBH, 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 03/16/16 ____ and assigned Florida document number L16000054002 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: NAMBH, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 900 BISCAYNE BLVD #4510 Enter new principal offices address, if applicable: MIAMI, FL 33132 (Principal office address MUST BE A STREET ADDRESS) 900 BISCAYNE BLVD #4510 Enter new mailing address, if applicable: MIAMI, FL 33132 (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: Name of New Registered Agent: 900 BISCAYNE BLVD #4510 New Registered Office Address: Enter Florida street address MIAMI

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 mercily 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

Et 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	NICOLAS AARON MIRSKY	900 BISCAYNE BLVD #4510	□ Ađd
		MIAMI, FL 33132	Remove
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D. If amendii	ng any othe	r informatio	ı, enter ch	ange(s) her	e: (Attach	additional	sheets, if r	iecessary.)	
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Dated MAF	RCH, 29			2018						
		Al	sirly		,	-, -, -				
	NICOTAS A	ARON MIRSI		nember or auth	iorized repres	sentative of a	member			
-	TICOBAS A			Typed or print	ted name of s	ignce				
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Page 3 of 3

Filing Fee: \$25.00