## L16000068403

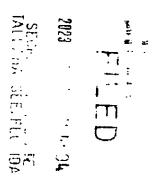
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## **COVER LETTER**

	ion Section of Corporations			
NAS' SUBJECT:	TEA LLC			•
	Name of the	nited Liability Company	····	
The enclosed Artic	les of Amendment and fee(s) are su	bmitted for filing.		
Please return all co	rrespondence concerning this matte	r to the following		
	GIANNI MENDES TON	ונדודנו		
		Name of Person		
FOSOLINI, FONIUTTI & PARTNERS				
	Firm <sup>2</sup> Company			
	407 LINCOLN ROAD, SUITE 11-C			
		Address	<del></del>	
	MIAMI BEACH, FL 33139		IAL AL	202
	<del></del>	City State and Zip Code		٠
	gianni toniutti@ttandpartn	ers com to be used for future annual report notifi-		
For further informa	tion concerning this matter, please of		Carlon) C. Frie [Ti	- I
GIANNI MENDES	STONIUTI	305 534-(9420)	Tř.	- 0
```	ame of Person	at ()	Telephone Number , Din.	<b>1</b> C.
Enclosed is a check	for the following amount:			
■ \$25,00 Filing F	fee □ \$30.00 Filling 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 A	ddress:	Street Address:	÷	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, Fl. 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NASTEA LLC		
(Name of the Limited Liability Compa- (Allorida Limited L	ns as it now appears on our records.) Jability Company)	
he Articles of Organization for this Limited Liability Company	were filed on 04 06/2016	and assigned
orida document number 1.16000068403		·
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liabi	lity company here:	
ne new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LI C" or the	he abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		792 St
		C-3
		<del>,</del> , , , , , ,
nter new mailing address, if applicable:		<u>.                                    </u>
Mailing address MAY BE A POST OFFICE BOX)	<u></u>	<u> </u>
. If amending the registered agent and/or registered office a gent_and/or the new_registered office address here:	ddress on our records, <u>enter the r</u>	tame of the new register
say and or the tegrities office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	I
	City	Zm 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. Thereby 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	MARCHITELLI, GUIDO	990 CORPORATE DRIVE	⊐add
		API 531	■Remove
		WESTBURY, NY 11590	☐ Change
			\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
			□Remove
			(TChange
			□Add
			DChange
			☐Add ☐Remove =
			ERemove -
			DA Li Change
			□Add
			Change
			TRemove
			ZRenove

D. If amending any other man matton, enter change(s) here. (Anach t	additional success, if necessary, j	
· · · · · · · · · · · · · · · · · · ·		
·		
-		
E. Effective date, if other than the date of filing:  (If an effective date is listed, the date must be specific and cannot be prior to date of filin Note:  If the date inserted in this block does not meet the applicable statutor document's effective date on the Department of State's records.	(optional)  ng or more than 90 days after filing ) Pursuant to 605 0207 ( y filing requirements, this date will not be listed as t	(3)(6) the
If the record specifies a delayed effective date, but not an effective time, at 12:01 record is filed.	La.m. on the earlier of: (b) The 90th day after the	
Dated JANUARY 12 2023		
Stefank Nacaman Signature of a member or authorized represe	entative of a member	9000 9000 9000 9000 9000 9000 9000 900
STEFANIA NARDIZZI	; ,	•
Typed or printed name of sig	gues [1]	, l
	<u> </u>	111
Filing Fee: S2	25.00	