## 116000077262

(Red	questor's Name)			
(Add	dress)			
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(City	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	siness Entity Nar	ne)		
(Do	cument Number)			
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## **COVER LETTER**

TO:	Registration Secti Division of Corpo			
SUBJ	ECT:	N: toos ?n Name of Limit	perties UC  ted Liability Company	
The en	closed Articles of A	nendment and fee(s) are subn	nitted for filing.	
Please	return all correspond	ence concerning this matter t	o the following:	
		Ken	Waz nia k	
			ros Properties L  Firm/Company	LC
		607 52	Address	
		St Peters Phase	City/State and Zip Code  - Lucy BB e close o be useful future annual report notifice	703
				ation)
For fu	rther information con	Hartues	ati (813) 380 a	229 J Relephone Number
$N_{I}$	sed is a check for the 25.00 Filing Fee	following amount:  [] \$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 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

Nitros Properto	ies LLC
(Name of the Limited Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L16000077262</u>	vere filed on 4/19/16 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	Au S
(Principal office address MUST BE A STREET ADDRESS)	LG F
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Y 26 AM 9: 33 HASSEE FLORIDA
B. If amending the registered agent and/or registered office address here:	
New Registered Office Address:  Harty  Mew Registered Office Address:  St Pet	Enter Florida street address  City  Property Holdings Confi
New Registered Agent's Signature, If changing Registered Agent:	
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am familiar with and rovided for in Chapter 605, F.S. Or, if this document is

and Agent, Signature of New Restatered 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 Address 52 w Av N **Title** Type of Action St Peterslus, FL 33703 □ Add Remove ☐ Change 607 52md AV N St Petersburg, FL 33703 MADD ☐ Remove Change. \_ Add □ Remove □ Change ☐ Remove D Change. \_D Add ☐ Remove ☐ Change

Page 2 of 3

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	and also
tive date, if other than the date of filing:(optional)	
tive date, if other than the date of filing:  (optional)  Receive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to lift the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be neat's effective date on the Department of State's records.  Count specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e-90th day after the record is filed.	e listed as the
May 23 rd 20,17	
Signature of a definition or suthorized representative of a member  Ken Watania Manager  Typod or printed gains of signes	SECRE
	MAY 26 DRETARY AHASSE

AM 9: 35
F. STATE
FLORIDA