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DIVISION OF CORPORATIONS

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Tallahassee, FL 32314

	Registration Se Division of Cor			
SUBJEC	NIUPI LLC	!		
SUBJEC	∪1; <u></u>	Name of Lim	ited Liability Company	
The encl	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		JUAN HURTADO		
			Name of Person	-
		NIUPI LLC		
			Firm/Company	
		14620 NW 3rd AVE		
			Address	
		MIAMI, FL. 33168		
		 	City/State and Zip Code	
		JUANJOSEHURTADO@F	IOTMAIL.COM to be used for future annual report notifi	cation)
For furth	ner information c	oncerning this matter, please ca	<u>-</u>	·············
JUAN H	IURTADO		786 218-6264 at ()	
	Name o	f Person		Telephone Number
Enclosed	d is a check for th	ne 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)
	Registr	ING ADDRESS: ation Section	STREET/COURIE Registration Section	ı
		n of Corporations ox 6327	Division of Corpora Clifton Building	tions

Clifton Building

2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NIUPI LLC				
(Name of the Limited I (A	Liability Comps Florida Limited	nny as it now appears on our Liability Company)	records.)	
The Articles of Organization for this Limited Liabi	ility Company	were filed on	and assigned	l
This amendment is submitted to amend the following	ing:			
A. If amending name, enter the new name of th	e limited liab	ollity company here:	אצוגיוס	71
The new name must be distinguishable and contain the word	s "Limited Liabi	ility Company," the designation	"LLC" or the abbreviation "L.L."	
Enter new principal offices address, if applicabl	ie:	14620 NW 3rd AVE	0F C4	_ m
(Principal office address MUST BE A STREET A		MIAMI, FL. 33168	WARP QUALITY	_ `
Enter new mailing address, if applicable:		14620 NW 3rd AVE MIAMI, FL 33168	E ORPORATIONS	.
Mailing address MAY BE A POST OFFICE BO B. If amending the registered agent and/or registered agent and/or the new registered office	registered o		cords, enter the name of th	e new
Name of New Registered Agent:	JUAN HURTA	ADO		
New Registered Office Address:	14620 NE 3rd			
-		Enter Florida street		
<u> </u>	MIAMI		_, Florida 33168	
		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

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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ANDRES HURTADO	275 NE 18th STREET #1207	
		MIAMI, FL. 33132	■ Remove
·			Change
MGR	JUAN HURTADO	14620 NW 3rd AVE	■ Add
		MIAMI, FL 33168	□ Remove
			Change
			Remove The Remove
			
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te: If the	date inserte	d in this b	lock does no epartment o	t meet ti	ne applica	ble statuto	ry filing re	quirement	s, this date	will not	be listed	l as t
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record :	specifies a	delaye	d effective	e date,	but not	an effec	tive tim	e, at 12:	01 a.m.	on the	e earliei	r of:
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Filing Fee: \$25.00