46000202845

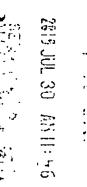
•
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



300332484583

07/30/19--00018--009 **25.60



Y SULKER AUG 0 5 2019

COVER LETTER

Division of C					
NVI IMP SUBJECT:	ORT, EXPORT & CONSULTI	NG LLC.			
	Name of Lir	nited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are suf	bmitted for filing.			
Please return all corresp	pondence concerning this matter	to the following:			
	Carolina Meneghetti				
		Name of Person			
Safety Tax & Bookkeeping					
Firm/Company 6220 S Orange Blossom Trl Ste 600					
		Address			
	Orlando, FL 32809				
	City/State and Zip Code safety@safetytax.com				
	E-mail address: (to be used for future annual report notif	ication)		
For further information	concerning this matter, please c	all:			
Carolina Meneghetti		407 888-4747 at()			
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 tadditional 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

NVI MPORT, EXPORT & CON			
(Name of the Lim	ited Liability Compa (A Florida Limited)	ny as it now appears on our reco Liability Company)	<u>rds.</u>)
The Articles of Organization for this Limited I Florida document number L16000202845		were filed on	and assigned
This amendment is submitted to amend the fol	llowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
The new name must be distinguishable and contain the	words "Limited Liabil	lity Company," the designation "LI	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	1246 SW 6Th St	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)		Pompano Beach, FL, 33069	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		2437 Annacella Ave Kissimmee, FL, 34741	
B. If amending the registered agent and registered agent and/or the new registered o			ds, enter the name of the no
Name of New Registered Agent:	DIONISIO MA	NARIN, RICARDO	
New Registered Office Address:	2437 Annacell		
		Enter Florida street addr	ess
	Kissimmee, Fl	-	Florida 34741

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

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	DIONISO MANARIN. RICARDO	2226 VICTORIA DRIVE, DAVENPORT, FL, 33837	□ Add
			■ Remove
	MANARIN, RICARDO DIONISIO	2437 Annacella Ave,	□ Change
MGR		Kissimmee, FL, 34741	□ Add
			□ Remove
			
			Remove
			Change
		<u>.</u>	☐ Remove
			Change
		 	□ Add
			☐ Remove
			Change
			Add
			Remove
		·	Change

-	
-	
-	
-	
-	
-	
_	
_	
_	
-	
-	
_	
-	
-	
-	
_	
(If an eff <u>Note:</u>	ve date, if other than the date of filing:
f the red b) The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	River Orinet . Anna
	Signature of a member of authorized representative of a member
	RICARDO DIONISIO MANARIN
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00