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O SIMMONS DEC 2 2 2016

# **COVER LETTER**

TO: Registration Section Division of Corpo			
SUBJECT: NIV	e for less,	LLC	
C.	Name of Limit	ed Liability Company	
The enclosed Articles of Ar	mendment and fee(s) are subm	nitted for filing.	
Please return all correspond	lence concerning this matter to	o the following:	
	1000	Hich	
	Jacquell	ne Keung	
	. 0	Name of Person	
	Drive tor	less LLC	<u>,</u>
	117-1 C T	Firm/Company	<b>a</b>
	971 3 H	agler Ave	33060 )P
	0	Address	330
	<u>Pompano</u>	Beach, FL 3	330 <b>69</b>
	drive for lac	City/State and Zip Code	
	E-mail address: (t	S 11 C @ gmail to be used for future amount report not	flication)
For further information con	ncerning this matter, please ca	all:	
Jacaseline	Hi Lin Keung	054 84	2 7237
Name of	Person Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee &	□ \$55.00 Filing Fee &	□ \$60.00 Filing Fee,
•	Certificate of Status	Certified Copy (additional copy is enclosed)	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

• 1	less LLC				
(Name of the Limite	d Liability Company as it n A Florida Limited Liability C	ow appears on our reco ompany)	rds.)	<del></del>	
The Articles of Organization for this Limited Lie Florida document numberL   6 00 20	ability Company were fil	ed on <u>11/14</u>	12016	nd assigned	
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liability cor	npany here:			
The new name must be distinguishable and contain the w	ords "Limited Liability Comp	any," the designation "Ll	LC" or the abbrevia		-
Enter new principal offices address, if application	able:			E E	- I I
(Principal office address MUST BE A STREE	T ADDRESS)			<u> </u>	_ [
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE)	ROY)			PH 1: 23	
Intaining mairess harif be 711 Ob 1 Of a 10E					- -
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:  New Registered Office Address:			Lin K-		new -
	Pompano	Beach,	Florida <u>3</u>	306 <b>9</b> ip 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.

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> <u>Address</u> **Type of Action** Creki Faustin \_□ Change □ Add ☐ Remove \_□ Change □ Add \_□ Remove IN BEC \_ Change, ် ် \_□ Add ☐ Remove \_ Change □ Add ☐ Remove \_ Change

16 DEC 19 PM 1: 23  DECTS ON CHARGE PROPERTY AND A SHARE PROPERTY AND A	Effective date, if other than the date of filing:(optional) f an effective 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 605.0207 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as	19 PM 1: 23		<del></del>	<del></del>	<del></del>				
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Filing Fee: \$25.00