

L16000225893

Florida Department of State Division of Corporations Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : THE LAW OFFICES OF NICK SPRADLIN PLLC
Account Number : 120070000020
Phone : (813)435-3176
Fax Number : (713)429-1276

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
INOGUILD, LLC

Certificate of Status	0
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J. LEGGETT
MAR 22 2018

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

INOGUILD, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 12/14/2016 and assigned Florida document number L16000225893.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

NTLS, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

18119 Kara CT

Tampa, Florida 33647

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

18119 Kara CT

Tampa, Florida 33647

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: _____

New Registered Office Address: _____

Enter Florida street address

Florida

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

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>	<u>Type of Action</u>
D	THE LAW OFFICES OF NICK SPRADLIN, PLLC	18801 N. DALE MABRY HWY	<input type="checkbox"/> Add
		#119	<input checked="" type="checkbox"/> Remove
		LUTZ, FL 33548	<input type="checkbox"/> Change
AMBR	Nikishu Sturks	18119 Kara CT	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
		Tampa, Florida 33647	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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