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J. LEGGETT MAR 1 6 2018

, COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: NJW Enterorise Engle VIEW LLC Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Grace Fishter Name of Person
NJN Enterprise Eagle View
271 SW 5th Address
Boca Raton, C1 33432- City/State and Zip Code
E-mail address: (to be used for future annual reportudification)
For further information concerning this matter, please call:
Crace Cighter at (407) 6975731 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee S25.00 Filin

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

Name of the Limited Lia	Procise Facle View UC Ability Company as it now appears on our records.) Orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit	· · · · · · · · · · · · · · · · · · ·
This amendment is submitted to amend the following A. If amending name, enter the new name of the	
The new name must be distinguishable and contain the words " Enter new principal offices address, if applicable:	Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
(Principal office address MUST BE A STREET AL Enter new mailing address, if applicable:	ODRESS) \
Emer new maning address, if applicable. (Mailing address MAY BE A POST OFFICE BOX)	W/A ====================================
registered agent and/or the new registered office a	egistered office address on our records, enter the name of the new
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 **Type of Action** Title <u>Name</u> **Address** Eric Herbst ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change _□ Add □ Remove □ Add ☐ Remove ☐ Change

					
					
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effective date is listed, the e: If the date inserted	than the date of filing date must be specific are in this block does not on the Department of	nd cannot be prior to meet the applicab	date of fling or mor le statutory filing	(option to than 90 days after five equirements, this d	ling.) Pursuant to 605.0
	delayed effective the record is filed		an effective tin	ne, at 12:01 a.ı	m. on the earlier
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Page 3 of 3

Filing Fee: \$25.00