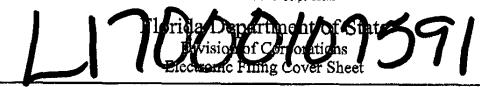
6/2/2017

Division of Corporations



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COVER LETTER

TO:	Registration S Division of Co		**************************************	
SUBJ	NUOVI (ORIZZONTI, LLC		
3000	<u></u>	Name of Lim	ited Liability Company	
		of Amendment and fee(s) are sub pondence concerning this matter		
		Sarah Gulati, Esq.		
	•		Name of Person	······································
		Gulati Law, P.L.		
	•		Firm/Company	
		479 Montgomery Place		
			Address	
		Altemonte Springs, Florid	a 32714	
		office@gulatilaw.com	City/State and Zip Code	
			to be used for future annual report no	tification)
For fu	ther information	concerning this matter, please c	all:	
Sarah	Gulati, Esq.		407 900-5054	
	Name	of Person	Area Code Dayti	me Telephone Number
Enclos	ed is a check for	the following amount:		
	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Cartificate of Status & Certified Copy (additional copy is enclosed)
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MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NUOVI ORIZZONTI, LLC		
(A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on May 15, 2017	and assigned
Florida document number L17000107591		
This amendment is submitted to amend the following:	•	
A. If amending name, <u>enter the new name of the limited lial</u>	oflity company here:	
		هسد خشد.
he new came must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLC" or	
Enter new principal offices address, if applicable:		perfect to the perfec
Principal office address MUST BE A STREET ADDRESS)		. 13
Inter new mailing address, if applicable:		2 77 10 2
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered o	ffice address on our records, e	nter the name of the ne
egistered agent and/or the new registered office address her	<u>'e</u> :	
Name of New Registered Agent:		
New Registered Office Address:	. •	
	Enter Florida street address	
	. Florid	la
	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>	Name	Address	Type of Action
MGR	Giselle Vallocci Covre	479 Montgomery Place	
		Altamonte Springs, Florida 32714	Remove
			☐ Change
MGR	Ana Rute Vallocci	479 Montgomery Place	
		Altamonte Springs, Florida 32714	Remove
			Change
MGR	Ana Rute de Sa Teles Vallocei	479 Montgomery Place	Add
		Altamonte Springs, Florida 32714	□ Remove
			Change
MGR	Valdoeste Braz Vallocci	479 Montgomery Place	Add
		Altamonte Springs, Florida 32714	□ Remove
			Change
			ro □ Add
	·		Remove
			Change
			DAdd
			Remove
			□ Change

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ffective date, if other than the date of filing:	(optional)
ffective date, if other than the date of filing: on effective date is listed, the date must be specific and cannot be prior to date of filing or more than Note: If the date inserted in this blook does not meet the applicable statutory filing requi- locument's effective date on the Department of State's records.	rements, this date will not be listed
ocument's effective date on the Department of State's records.	
e record specifies a delayed effective date, but not an effective time,	at 17:01 a.m. on the earlier
The 90th day after the record is filed.	4 - 12.184 MILL ALL MILL WOLLD
* *	
pated june 1st 2017	
Pated June 1st 2017	
June 1st 2017 Lucal Ap Call Signature of a member of numbrized representative of a me	ember

Page 3 of 3

Filing Fee: \$25.00