

L17 000 131 630

(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:

2686/114

Office Use Only



300428651023

05/03/24--01018--05

FILED  
2024 MAY -3 AM 11:08  
CLERK OF STATE  
TALLAHASSEE, FLORIDA

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Nale 4949, LLC  
\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fees(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Cliff Levy  
\_\_\_\_\_  
Name of Person  
  
Nale 4949, LLC  
\_\_\_\_\_  
Firm/Company  
  
3641 W. Kennedy Blvd., Suite A  
\_\_\_\_\_  
Address  
  
Tampa, FL 33609  
\_\_\_\_\_  
City/State and Zip Code  
  
Accounting@icisc.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Johna O'Hara  
\_\_\_\_\_  
Name of Person  
  
813 353-2220 x1002  
at (\_\_\_\_\_) \_\_\_\_\_  
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|--|--|--|--|

**Mailing Address:**

Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Nale 4949, 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 06/15/2017 and assigned  
Florida document number L17000131030.

This amendment is submitted to amend the following:

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

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)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**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*

*City*

Florida

*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>
MGR	Jordan Levy	3641 W. Kennedy Blvd	<input checked="" type="checkbox"/> Add
		Suite A	<input type="checkbox"/> Remove
		Tampa, FL 33609	<input type="checkbox"/> Change
MGR	Grant Levy	3641 W. Kennedy Blvd	<input checked="" type="checkbox"/> Add
		Suite A	<input type="checkbox"/> Remove
		Tampa, FL 33609	<input type="checkbox"/> Change
MGR	Shayla Levy	3641 W. Kennedy Blvd	<input checked="" type="checkbox"/> Add
		Suite A	<input type="checkbox"/> Remove
		Tampa, FL 33609	<input type="checkbox"/> Change
MGR	Casey Ahern	3641 W. Kennedy Blvd	<input checked="" type="checkbox"/> Add
		Suite A	<input type="checkbox"/> Remove
		Tampa, FL 33609	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If 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 (3)(b)

Dated

April 12

2034

Signature of a member or authorized representative of a member

Cliff Levy

Typed or printed name of signee