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(shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : TAXPEOPLE LLC
Account Number : I20200000160
Phone : (772)460-1000
Fax Number : (772)777-3071

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN' FILIZZOLA NOVA SPECIAL SERVICE, LLC

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T. LEMIEUX APR - 4 2023

## **COVER LETTER**

Registration Section TO: Division of Corporations

SUBJECT:	LIZZOLA NOVA SPE	CIAL SERVICE, LLC	
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing	
	•	· ·	
Please return all correspon	ndence concerning this matter	to the following:	
	•	CLAUDIO TOLEDO RIBEIRO	
		Name of Person	
		TAXPEOPLE, LLC	
		Firm/Company	<del></del>
		2855 SW BRIGHTON ST	
		Address	
		PORT LUCIE, PL 34953	
	<del></del>	City/State and Zip Code	<del></del>
		info@taxpeoplefl.com	
	E-mail address: (	to be used for future annual report noti	fication)
For further information co	ncerning this matter, please c	all:	
Claudio Toledo Ribeiro		772 460.1000	
Name of	Person	at ()	e Telephone Number
Enclosed is a check for the	e following amount:		
	-		
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	<ul> <li>\$60.00 Filing Fee,</li> <li>Certificate of Status &amp;</li> <li>Certified Copy</li> <li>(additional copy is enclosed)</li> </ul>

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 (((H23000123849 3))) OF

## FILIZZOLA NOVA SPECIAL SERVICE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 07/13/2017 The Articles of Organization for this Limited Liability Company were filed on and assigned Florida document number L17000150797 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: DEL NOVA MARTIAL ARTS ACADEMY, 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) 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 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 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

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Title	Name	Address	Type of Action
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effective d 207 (3)(b)	e, if other than the date of filing:
	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th record is filed
ated Fe	Signature of a member or authorized representative of a member
,	Typed or printed name of signed