117000175254

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 30, 2019

NOMADE VILLA COLLECTION LLC 8412 SW 29TH ST MIRAMAR, FL 33025

SUBJECT: NOMADE VILLA COLLECTION LLC

Ref. Number: L17000175254

We have received your document for NOMADE VILLA COLLECTION LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Yasemin Y Sulker Regulatory Specialist III

Letter Number: 319A00018038

www.sunbiz.org

0111 00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L1700017525</u>	were filed on $08/16/2017$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity 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)	1019 NE 87/4 STREET MOTIVAL , 7C 33138
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1019 NE 874 5 BREET
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	ffice address on our records, enter the name of the new
Name of New Registered Agent: Ramo	ne Walker ilc
New Registered Office Address: 8412	Substitution 29 th ST Enter Florida street address
Mirama	City . Florida 33025 Zip Code
View Description of the court Ct. The Co. The Co. The Co. The Co. The Co.	

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>	Address	Type of Action
MGR	Alena Yanul	1019 NE 87 th Street	Add
			□ Remove
			Change
			Add
			🗖 Remove
			Change
			🗆 Add
		·	Remove
			Change
			Add
			Remove
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			Remove
			Change
			Remove
			Change

D. Han	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
T	
(If an ei <u>N</u> ote:	tive date, if other than the date of filing: [Tective 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) If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
the re	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	_08/19/19
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00