## L17000180730

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Special Instructions t	o Filing Officer		

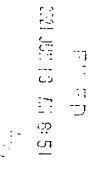




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## **COVER LETTER**

	Registration S Division of C			
SUDIEC	Noslen &	Beyond LLC		
SUBJEC	.1:	Name of Lin	nited Liability Company	<del></del>
THE	. 1421	54 L . 16 ()		
		of Amendment and fee(s) are sub	_	
Please re	turn all corres	pondence concerning this matter	to the following:	
		Noslen F. Ortega Pacheco		
			Name of Person	
		Noslen & Beyond LLC		
		-	Firm/Company	
		1413 Lake Ave		
			Address	
		Lehigh Acres, FL 33972		
		<del></del>	City/State and Zip Code	
		noslenandbeyond@gmail.e	om to be used for future annual report no	atification)
For furth	er information	concerning this matter, please c	·	Time action of
	. Ortega Pach	- ·	239 674-3500	
		of Person	at ()	me Telephone Number
	, tune	OT LEISON	Alea Code Davi	me reteptione (vultide)
Enclosed	is a check for	the following amount:		
₩\$25.0	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addre		Street Address:	
	Registration Division of	Corporations	Registration S Division of Co	
	P.O. Box 63		The Centre of	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Noslen & Beyond 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 08/23/2017 \_\_\_\_\_ and assigned Florida document number L17000180730 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 "LLC." 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

## 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
Manager	Glorivee Marie Sevilla Serrano	2705 41st ST W	□Add
		Lehigh Acres, FL 33971	≣Remove
			□Change
			□Remove
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If amending any other info	ormation, enter cha	nge(s) nere: (Anaci	п ааашопаі sneeis, ij п	ecessary.)
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Effective date, if other than a lf an effective date is listed, the date inserted in the document's effective date on	n the date of filing: ite must be specific and ca his block does not me	annot be prior to date of t et the applicable statut	iling or more than 90 days a	otional) fler filing.) Pursuant to 605.0207 this date will not be listed as
e record specifies a delayed et rd is filed.	Tective date, but not ar	л effective time, at 12:	01 a.m. on the earlier of:	(b) The 90th day after the
Dated 06 [15]		2.		2021
Dated 06 [5]	<del></del> :			2021 Jil!"
	Signature of pine		esentative of a member	$\frac{\ddot{\omega}}{\omega}$
		and a authorized repre	escinative of a member	書号
Noslen F. Ortega	Pacheco			ĊĴ

Filing Fee: \$25.00