## 117000207197

(Red	questor's Name)	
(Add	dress)	
(Add	dress)	
(City	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nar	ne)
(Doc	cument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to F	Filing Officer:	

Office Use Only



700305218617

11/06/17--01025--014 \*\*25.00

2017 NOW -6 PM 2: 50 SEGRETARY OF STATE

K. SALY NOV - 7 2017

## **COVER LETTER**

TO:	Registration Se Division of Cor			
.>		NI	SSA LLC	
SUBJI	xC1:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
			STUART II GLAUSER	
			Name of Person	<u> </u>
			G AND G CPA'S INC	
			Firm/Company	
			1771 NE 162 STREET	
			Address	
		N	ORTH MIAMI BEACH, FL 33	162
			City/State and Zip Code	
			JUANITA@GANDGCPA.CO	
		E-mail address: ()	to be used for future annual report i	notification)
For fur	ther information c	oncerning this matter, please ca	all;	
	JUANITA:	SANKOVICH	305 at () Area Code Day	931-1265
	Name o	f Person	Area Code Day	time Telephone Number
Enclos	ed is a check for th	ne following amount:		
<b>■</b> \$2:	5.00 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 ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ZOITNON-6 PH 2:50

TALLAHASSEE. FLORIS.

NISSA LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A	Florida Limited Liability Company)	·	LORIDA
The Articles of Organization for this Limited Liabi Florida document number		OCTOBER 6, 2017	and assigned
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of th	e limited liability company h	ere:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the	designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable	e:		
(Principal office address MUST BE A STREET)	( <i>1DDRESS</i> )		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	-		
B. If amending the registered agent and/or registered agent and/or the new registered offic	4	n our records, <u>enter t</u>	he name of the
Name of New Registered Agent:			<del></del>
New Registered Office Address:	Enter Flo	orida street address	
		, Florida	
	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>	<u>Name</u>	Address	Type of Action
AMBR	DEMIUMA COMIMPEX S.R.I.	Electronica Industrial Park, El Prof	B Add
		82 Baicului Street 2nd District	□ Remove
		Bucharest	☐ Change
			D Add
			Remove
			Change
		· · · · · · · · · · · · · · · · · · ·	AHASSER CONTRACTOR
			Change Change Change St. Remove St. TARETAREROY AND A Add Add
			Add
			☐ Remove
			☐ Change
			Add
			Remove
			Change
	<del></del>		
		<del></del>	☐ Remove
			☐ Change

· · · · · · · · · · · · · · · · · · ·	
	•
	75.
	77.0
	5,5,7,
	500
·	
	77.25
<u> </u>	
	<del>-</del>
e date, if other than the date of filing:	(optional)
tive date is listed, the date must be specific and cannot be prior to date of filin	ng or more than 90 days after filing.) Pursuant to 605.0207 (3
I the date inserted in this block does not meet the applicable statutory it's effective date on the Department of State's records.	y filing requirements, this date will not be listed as th
it serietive date on the Department of State s records.	
ord specifies a delayed effective date, but not an effect 90th day after the record is filed.	tive time, at 12:01 a.m. on the earlier of:
11/2 2017/	_
/ / / /	

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee