L17000249027

(Re	equestor's Name)	_		
(Ac	dress)	<u></u>		
(Ac	(dress)			
(City/State/Zip/Phone #)				
PICK-UP	WAIT	MAIL MAIL		
(Bu	isiness Entity Nam	ne)		
(Do	ocument Number)			
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

Office Use Only

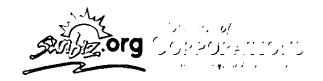


200314730182

07/16/18--01037--011 **25.00

SECRETARY OF STATE OF STATE OF CORPORATIONS

N COOPER JUL 18 2018



Department of State / Division of Corporations / Search Records / Detail By Document Number /

Detail by Officer/Registered Agent Name

Florida Limited Liability Company

NOVOTEK LLC

Filing Information

Document Number

L17000249027

FEI/EIN Number

NONE

Date Filed

12/05/2017

Effective Date

12/05/2017

State

FL

Status

ACTIVE

Principal Address

19101 NW 52ND CT MIAMI, FL 33055

Mailing Address

19101 NW 52ND CT

MIAMI, FL 33055

Registered Agent Name & Address

NOVOA, RENATO J 19101 NW 52ND CT MIAMI, FL 33055

Authorized Person(s) Detail

NONE

Annual Reports

No Annual Reports Filed

Document Images

12:05/2017 - Florida Limited Liability

View image in PDF format

COVER LETTER

то:	Registration Section Division of Corporations
SUBJ	ECT: NOVOTEK LLC
	Division of Corporations SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Revato J Novot Name of Person HOUOTEK LUL Firm Company 19101 NW 52CT Address Hiami FL 33055 City/State and Zip Code Rowag & NovotEK. US E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Revato J NovotEK at 305 Area Code Royago & 153 Daytime Telephone Number Enclosed is a check for the following amount: PS25.00 Filing Fee Certificate of Status Certificed Copy Certificate of Status & Certificate Copy serelesed)
The er	closed Articles of Amendment and fee(s) are submitted for filing.
Please	return all correspondence concerning this matter to the following:
SUBJECT: Novotek LLC Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Renato J Novot Name of Person Address Miami FL 33005 City/State and Zip Code Renato Bovotek US E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Renato J Novote Status Area Code Daytime Telephone Number Enclosed is a check for the following amount: 17 S25.00 Filing Fee Scerificate of Status Certificate of Status & Certified Copy Certificate of Status & Certified Copy Certificate of Status & Certified Copy	
	Miami FL 33055
	E-mail address: (to be used for future annual report notification)
For fu	ther information concerning this matter, please call:
;	Name of Person at (305) 763-1153 Area Code Daytime Telephone Number
Enclos	ed is a check for the following amount:
175 ∕\$2	Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy

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

NOVOTEA	t LLC	
(Name of the Limited Liability Comp. (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>L17-000249627</u> .	y were filed on Miami, Florici	/ <u>A -</u> 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 Liab	ility Company " the designation "LLC" or the	abbreviation "LLC"
<u>-</u>		
Enter new principal offices address, if applicable:	-	3 × × × × × × × × × × × × × × × × × × ×
(Principal office address MUST BE A STREET ADDRESS)		
		<u>FX</u>
		6 CC RY
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		9. S.
		1100 1100
		70
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her		r the name of the ne
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	nuer r ioriaa sirvei aadress	
	, Florida _	
	Cin	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>	Name	Address	Type of Action
MGR	Renato J Nousa	19101 NW52CT	Add.
		Miami GL 33055	Remove
			Change
			Add
			C Remove
			Сһалде
			Add
			🗆 Remove
			Change
			□ Add
			□ Remove
			Change
			□ Add
			Remove
		 	Change
			□ Adđ
			_ □ Remove
			Change

II AII	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
		<u> </u>	-
			•
		-	-
			-
			-
			=
	anno e de esta de la companya de la		0
		18	ISIAID 33S
	· · · · · · · · · · · · · · · · · · ·	7	いる
			COX
		<u>₹</u>	POSI
		9.	HOLL
			-
(If an e <u>Note</u>	effective date, if other than the date of filing:	uant to 605 not be list	5.0207 (ed as t
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t e 90th day after the record is filed.	he earli	er of:
Dated	May 29th 2018.		
	Signature of a member or dathorized representative of a member		
	KENATO J NOUDA		

Page 3 of 3

Filing Fee: \$25.00