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J. HARRIS

## **COVER LETTER**

TO:

**Registration Section Division of Corporations** 

SUBJECT: NFL PROPERTIES OF FLOIR DA 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:
Lourdes Martinez Name of Person
NFL PROPERTIES OF FLOIRDA LLC Firm/Company
9554- Burlington PL.
Boca Ratur F1. 3343 4 City/State and Zip Code
Lemail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Lourdes Martinez at (S61) 674-5210  Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status Scriffied Copy (additional copy is enclosed)  \$25.00 Filing Fee Scrifficate of Status Scriffied Copy (additional copy is enclosed)  \$25.00 Filing Fee Scriffied 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

NFL PROPERTIES OF FLOIR DA 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 February 16, 2018 and assigned

Florida document number <u>L 1 8 0 0 0 0 4 2 8 4 0</u>				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liabi				
NEL PROPERTIES OF				
The new name must be distinguishable and contain the words "Limited Liabili	ity Company." the designation "LLC	" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	9554 Burling	19ton PL.		
(Principal office address MUST BE A STREET ADDRESS)	Boca Ration	F1, 33434		
,				
		70		
Enter new mailing address, if applicable: $\mathcal{N}/\mathcal{A}$		SS 22		
(Mailing address MAY BE A POST OFFICE BOX)		ms y		
		60 -		
		<b>6</b> 4		
B. If amending the registered agent and/or registered of		s, enter the name of the new		
registered agent and/or the new registered office address here	· N/M			
Name of New Registered Agent:	•			
The state of the s				
New Registered Office Address:	Enter Florida street addre:			
	isher i torida sirevi adare:	73		
	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: N/A

MGR = Manager

, , , , , , ,	Authorized Member		
<u>Title</u>	Name	Address	Type of Action
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_	ourdes Mar	1	,	<b>→</b> Sec. 2002	4 4 2
1	auchos Mai	MARZ		m <sup>2</sup> ~	

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Filing Fee: \$25.00