L18000054532

(Re	questor's Name)	
(Ad	dress)	
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2019 JUN 24 PM 2: 57

C. GOLDEN

JUL - 8 2019

COVER LETTER

TO: Registration Sec Division of Corp			
SUBJECT: NTK	Name of Limit	ed Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
Please return all correspon	dence concerning this matter to	o the following:	
	Nedoje	Name of Person	
	NZKLLC.	Firm/Company	N-1
	2803 N. Oak	Address Address	r. #109
	Lauderdale	Lakes FL 33300 City/State and Zip Code	7
	E-mail address: (to	be used for future annual report notificat	ion)
For further information co	ncerning this matter, please cal	1:	
Name of	Person OC VO	at (954) 449- Area Code Daytime Te	5689 Iephone Number
Enclosed is a check for the	e following amount:		
\$25.00 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)

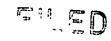
MAILING ADDRESS:

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



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NJKLLC		
(<u>Name of the Limited Li</u> (A F	iability Company as it now appears on our record forda Limited Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liabili Florida document number <u>L18000545</u>	· · · · ——	and assigned
This amendment is submitted to amend the followin	ığ:	
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	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A <u>POST OFFICE BON</u>	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		ls, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	NSS
_	, F	lorida
	0,	Dip Cont

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	Ervin Stewart	2803 Nankland Fores	} □Add
		2803 N. Oakland Fores	K Remove
		FL 33309	D Change
			🗆 Add
			Remove
			🗆 Change
			🗀 Add
			□ Remove
			Change
			🗆 Remove
 			□ Add
			☐ Remove
			Change
			🗆 Add
			□ Remove
			5 C1

. 11 4111	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an ef Note:	ive date, if other than the date of filing: 6/0/9 (optional) fective 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 (If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
	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	Signature of a member or authorized representative of a member
	Nachie Dorval

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Filing Fee: \$25.00