

L18000062209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

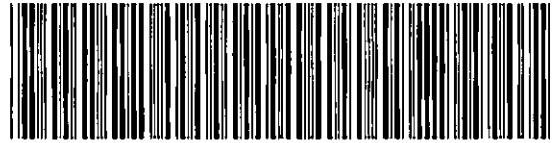
(Business Entity Name)

(Document Number)

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RECORDED  
2022 AUG 31 PM 12:12  
2022 AUG 31 PM 12:34  
ALABAMA STATE

8/31/2022

# COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Noteworthy Notary Services 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:

Michelle Brown  
\_\_\_\_\_  
Name of Person  
  
Noteworthy Notary Services LLC  
\_\_\_\_\_  
Firm/Company  
  
5840 Corporate Way Suite 250  
\_\_\_\_\_  
Address  
  
West Palm Beach, FL 33407  
\_\_\_\_\_  
City/State and Zip Code  
  
Notary@NwnServices.com  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Michelle Brown 954 393-8429  
\_\_\_\_\_  
Name of Person at ( ) Area Code Daytime Telephone Number

Enclosed is a check for the 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 Address:**  
Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

2022 AUG 31 PM 12:34

Noteworthy Notary Services 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 March 9, 2018 and assigned Florida document number L18000062209.

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 "L.L.C."

**Enter new principal offices address, if applicable:**

5840 Corporate Way Suite 250

**(Principal office address MUST BE A STREET ADDRESS)**

West Palm Beach, FL 33407

**Enter new mailing address, if applicable:**

5840 Corporate Way Suite 250

**(Mailing address MAY BE A POST OFFICE BOX)**

West Palm Beach, FL 33407

**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:

Michelle Brown

New Registered Office Address:

300 S.E 2nd Street, Suite 600

*Enter Florida street address*

Fort Lauderdale

Florida

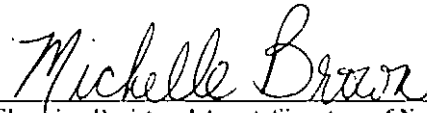
33301

*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>    | <u>Address</u>               | <u>Type of Action</u>                      |
|--------------|----------------|------------------------------|--|
| MGR          | Mikail Masood  | 5840 Corporate Way Suite 250 | <input type="checkbox"/> Add               |
|              |                | West Palm Beach, FL 33407    | <input type="checkbox"/> Remove            |
|              |                |                              | <input checked="" type="checkbox"/> Change |
| MGR          | Miqara Masood  | 5840 Corporate Way Suite 250 | <input type="checkbox"/> Add               |
|              |                | West Palm Beach, FL 33407    | <input type="checkbox"/> Remove            |
|              |                |                              | <input checked="" type="checkbox"/> Change |
| MGR          | Yasmiin Masood | 5840 Corporate Way Suite 250 | <input checked="" type="checkbox"/> Add    |
|              |                | West Palm Beach, FL 33407    | <input type="checkbox"/> Remove            |
|              |                |                              | <input type="checkbox"/> Change            |
| AMBR         | Michelle Brown | 5840 Corporate Way Suite 250 | <input type="checkbox"/> Add               |
|              |                | West Palm Beach, FL 33407    | <input type="checkbox"/> Remove            |
|              |                |                              | <input checked="" type="checkbox"/> Change |
|              |                |                              | <input type="checkbox"/> Add               |
|              |                |                              | <input type="checkbox"/> Remove            |
|              |                |                              | <input type="checkbox"/> Change            |
|              |                |                              | <input type="checkbox"/> Add               |
|              |                |                              | <input type="checkbox"/> Remove            |
|              |                |                              | <input type="checkbox"/> Change            |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: 9/7/2022 (optional)

(If an effective 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 (3)(b)  
**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated August 29, 2022

  
 \_\_\_\_\_  
 Signature of a member or authorized representative of a member

Michelle Brown  
 \_\_\_\_\_  
 Typed or printed name of signee