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COVER LETTER

SURJECT: 1324	Lake Dr. Holder Name of Limi	NSD, L.L.C.		
	Name of Limi	itel Liability Company		
The enclosed Articles of An	nendment and fee(s) are sub	mitted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
	RICHARD BE	RCINT Name of Person		
	1324 LAKE]	Firm/Company)		
		le Chase Dr. Address		
	Winter Sp	RINGA F1, 32708 City/State and Zip Code	201 0 DE	
	Dereinire E-mail address: (1	Jahoo, Com Tobe used for future annual report notifi	cation)	; <u>eran</u>
For further information con-	cerning this matter, please ca	all:		
RICHARD BERCI	erson	Ringa Fl. 32708 City/State and Zip Code Jah 00, Com Tolbe used for future annual report notificall:	C64 Telephone Number	ર ગ ⊃
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

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1, 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

(Name of the Limited	Holding a Liability Company as it Florida Limited Liability	L. L. (' Row appears on o Company)	ur records.)		
The Articles of Organization for this Limited Liab Florida document number <u>L 18000 2636</u>	ility Company were f			and assi	gned
This amendment is submitted to amend the follow	ring:				
A. If amending name, enter the new name of the large 1324 Lake D_{α} . The new name must be distinguishable and contain the work	he limited liability co	ompany here: L. C.			
The new name must be distinguishable and contain the word Enter new principal offices address, if applicable (Principal office address MUST BE A STREET)	ole:		HARNEY F1. 13		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE Bo	<u></u>	410 A	meria (Springo,	² t. Fl 32	7 <i>0</i> 8
B. If amending the registered agent and/or registered agent and/or the new registered offi					
Name of New Registered Agent:	ce address here: NATA LE D. 12543 HARN	HARPER		DEC 17	
New Registered Office Address:	12343 HARN	Enter Florida si	treet address	32.82NP	1 1 5
	ORLANDO	iny	Flo ri da _	Zip (me	

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.

H 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:

•	,
MCR =	Manager
1,1,3,4	······································
AMBR =	Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	NATALIE D. HARGER	12543 HERNEY Da.	
	·	ORlanso, Fl. 32828	□ Remove
			⊠ Change
AMBR	RICHARD BERCINI	124 SEVILLE Chase Dn.	
		124 SEVILLE Chase Dn. Winter Springo Al. 32708	Remove
		Change	
			□ Remove
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(If an effect <u>Note:</u> If	e date, if other than the calve date is fisted, the date must the date inserted in this block it's effective date on the Dep	he specific and cannot be priced does not meet the appl	icable statutory filing re		.) Pursuant to 605.0	
	rd specifies a delayed 0th day after the reco		ot an effective tim	e, at 12:01 a.m.	on the earlie	r of:
Dated	12-12-	2018	····································			
	12-12-	uha Bir Cira Signature of a member or aut	thorized representative of t	a member		
	_		nted name of signee			

Page 3 of 3

Filing Fee: \$25.00