L18000 273099

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COVER LETTER

Division of Cor	porations		
	al Estate Services LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Matthew Miller		
		Name of Person	
	Nexgen Real Estate Servic	es LLC	
		Firm/Company	
	1547 Prosperity Farms Rd		
Name of Person Nexgen Real Estate Services LLC Firm/Company			
	Lake Park, FL 33403		
		City/State and Zip Code	
	- · ·		
	E-mail address: (to be used for future annual report notif	lication)
For further information c	oncerning this matter, please co	nH: ·	
Matthew Miller			
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a cheek for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 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		Street Address: Registration Sec	ction
Division of Corporations		Division of Corporations	
P.O. Box 632	27	The Centre of T	allahassee

Tallahassee, FL 32314

o:

Registration Section

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2022 JUN 27 PH 5: 27

Nexgen Real Estate Services LLC				.*1 · ·
(<u>Name of the Limited Liat</u> (A Flor	oility Company as it now appear ida Limited Liability Company)	s on our records.)	175	7: -
The Articles of Organization for this Limited Liability Florida document numberL18000273099	/ Company were filed on	11/26/2018	and assigned	
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the li	mited liability company he	re:		
The new name must be distinguishable and contain the words "L	imited Liability Company," the de	esignation "LLC" or the	abbreviation "L.L.C."	_
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET AD)	DRESS)			_
				_
	•			
Enter new mailing address, if applicable:				_
(Mailing address MAY BE A POST OFFICE BOX)			- -	_
	 -			
B. If amending the registered agent and/or register agent and/or the new registered office address here		ecords, <u>enter the na</u>	ume of the new regist	terec
Name of New Registered Agent:				_
New Registered Office Address:	Enter Flor	ida street address	<u> </u>	-
		, Florida		
	City	. 1011111	Zip Code	_
New Registered Agent's Signature, if changing Registe	red Agen <u>t:</u>			
I hereby accept the appointment as registered ager provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this chang	l complete performance of l'agent as provided for in C vred office address, I hereb	my duties, and Lar Thapter 605, F.S. C	n familiar with and)r, if this document is	

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>	Address	Type of Action
MGR	Matthew Miller	4119 Sandy Spit Ln, Jupiter FL 33458	≣Add
			C)Remove
			[]Change
			□Add
			Remove
			ElChange
			□Add
			□Remove
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

. If amending any other inform	ation, enter change(s) here: (Att	tach additional sheets, if necessary.)	
			 -
			
	_		
			
			
Effective date, if other than the (If an effective date is listed, the date in Note: If the date inserted in this bedocument's effective date on the	ust be specific and cannot be prior to date block does not meet the applicable sta	(optional) of filing or more than 90 days after filing.) Pursuant atutory filing requirements, this date will not l	t to 605.0207 (3), be listed as the
he record specifies a delayed effect ord is filed.	ve date, but not an effective time, at	12:01 a.m. on the earlier of: (b) The 90th da	iy after the
Dated June 20	2022		
	Signature of a member or authorized to	enresentative of a member	
D. W. T. W.	111	1	
Ryan Tyszkow	Typed or printed name	e of signee	

Filing Fee: \$25.00