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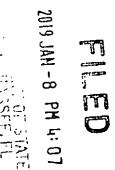
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

TO: Registration S Division of Co			
Nu World	Title of Kendall, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	f Amendment and fee(s) are sub ondence concerning this matter	_	
rease return an everesp	Rodolfo Hernandez	the tolling	
		Name of Person	
	Nu World Title of Kendall	. LLC	
		Firm/Company	
	11420 N. Kendall Dr., Sui	ie 207	
		Address	
	Miami, FL 33176		
	rudy@nuworldtitle.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information	concerning this matter, please o	all:	
Rodolfo Hernandez		954 649-7283 at ()	
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)
MAII	JNG ADDRESS:	STREET/COURI	ER ADDRESS:

Registration Section Division of Corporations

P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2019 JAH -8 PH 4: 07

Nu World Title of Kendall, 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 $\frac{01/02/2019}{}$ and assigned Florida document number L19000004547 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address 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>	Address	Type of Action
MGR	Erice, Louis II.	11420 N. Kendall Drive, #207	□ Add
	-	Miami, FL 33176	
			■ Remove
			Change
MGR Golik, Vladimir F.	Golik, Vladimir F.	11420 N. Kendall Drive. #207	
		Miami, FL 33176	
			■ Remove
			Change
			□ Remove
			Change
			□ Remove
			Change
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(If an ef <u>Note:</u>	ive date, if other than the date of filing: [cetive 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 (and the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective 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	January 2 2019

Page 3 of 3

Filing Fee: \$25.00