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COVER LETTER

	PROPERTIES, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Nancy Maiale		
	NMGRP PROPERTIES, LL	Name of Person	
	9000 Portofino Circle, Ste	Firm/Company	
	Palm Beach Gardens FL 3:	Address 3418	
	nancy@nancymaiale.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 ca	all:	
Name	of Person	at () Area Code Daytime	Telephone Number
, white	0.1.0130.1	, neu code 174 yunio	. recognition realists
Enclosed is a check for	Name of Limited Liability Company and Articles of Amendment and fee(s) are submitted for filing. In all correspondence concerning this matter to the following: Name of Person Name of Person NMGRP PROPERTIES, LLC Finn/Company 9000 Portofino Circle, Ste 106 Address Palm Beach Gardens FL 33418 City/State and Zip Code nancy@nancymaiale.com E-mail address: (to be used for future annual report notification) information concerning this matter, please call: Name of Person Area Code Daytime Telephone Number s a check for the following amount: Pfiling Fee \$\begin{array}{c} S55.00 Filing Fee & Certificate of Status & Certified Copy Certificate of Status &		
S25.00 Filing Fee			

MAILING ADDRESS:

TO:

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

NMGRP PROPERTIES, 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 01/08/2019 _ and assigned Florida document number L19000010198 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," 420 East Church Street Enter new principal offices address, if applicable: Ste 923 (Principal office address MUST BE A STREET ADDRESS) Orlando, FL 32801 420 East Church Street Enter new mailing address, if applicable: Ste 923 (Mailing address MAY BE A POST OFFICE BOX) Orlando, FL 32801 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.

City

If Changing Registered Agent, Signature of New Registered Agent

ff 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			Change
			Add
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an effective date is listed, the date must solve: If the date inserted in this blocument's effective date on the December 2.	ock does not meet the app	licable statutory fili	more than 90 days after f ng requirements, this	iling.) Pursu date will n	ant to 60 of be lis	05,0207 sted as
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Filing Fee: \$25.00