L19000010499

(Re	equestor's Name)	
(Ad	ldress)	· -
(Ad	idress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	me)
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MAY 1 / 2013 T. LEDNIEUD

COVER LETTER

Divi	ision of Cor	porations			
SUBJECT:	NLT Investi	ment Group, LLC			
NODSIE, I.		Name of Limi	ted Liability Company		
The enclosed	l Articles of a	Amendment and fee(s) are subr	nitted for filing.		
Please return	all correspon	ndence concerning this matter t	o the following:		
		Stephen Ghioto			
			Name of Person		-
		NLT Investment Group, LL	.C		
			Firm/Company		-
		5380 County Road 122			
			Address		
		Wildwood, FL 34785			
		sghioto@gmail.com	City/State and Zip Code	· · · · ·	
		E-mail address: (t	o be used for future annual rep	port notification)	
For further in	iformation co	oncerning this matter, please ca	11:		
Stephen Ghio	oto		352 789-9	9890	
	Name of	Person	Area Code	Daytime Telephone Number	- 1 T LO 1 T T LO
Enclosed is a	check for th	e following amount:			
\$25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	ed) Certified	te of Status &

MAILING ADDRESS:

TO:

Registration Section

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

NLT Investment Group, LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limite	ed Liability Company)	2019 MAY -1 P & RU		
The Articles of Organization for this Limited Liability Compared Florida document number $\frac{L19000010499}{L19000010499}$.	ny were filed on 01/	08/2019 THE TRIPLET STAND assigned WALLAHASSEE, FEUTILLE		
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited li	ability company he	re:		
The new name must be distinguishable and contain the words "Limited Lie	ability Company," the de	esignation "L.L.C." or the abbreviation "L.L.C."		
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 registered agent and/or the new registered office address h		our records, enter the name of the new		
Name of New Registered Agent:				
New Registered Office Address:	Enter Flor	ida street address		
	Florido			
	City	, Florida Zip Code		
New Registered Agent's Signature, if changing Registered Agen	<u>1t:</u>			
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a	rte performance of i	my duties, and I am familiar with and		

If Changing Registered Agent, Signature of New Registered Agent

being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability

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
AMBR	David Studdard		
		11231 US HWY ONE, STE. 333 NORTH PALM BEACH. FL	
		22.100	Remove
			□ Change
			□ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			☐ Remove
		** *** ***	□ Change
			Add
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			24/01/2010				
ective date, if	other than the d	ate of filing:	04/01/2019		(ont	ional)	
effective date is	listed, the date must l	be specific and car	mot be prior to da	te of filing or more	than 90 days after	r filing) Pursuant to	605.020
ument's effect	inserted in this bloc ive date on the Dep	ek does not meet partment of State	the applicable s's records.	statutory tiling r	equirements, th	is date will not be	listed a
record speci	fies a delayed	effective date	e, but not ar	effective tim	ne. at 12:01	a.m. on the ea	arlier c
he 90th day	after the reco	d is filed.			,		
04/25/2010							
ed		,/-	7,	0.			
			/ //				
		ignarate of Jmerr	her or authorized	/-			

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Typed or printed name of signee

Filing Fee: \$25.00