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COVER LETTER

TO: Registration S Division of Co			
SUBJECT: Nexus S	Security Firm		
		ited Liability Company	
	Amendment and fee(s) are sub	_	
Please return all corresp	ondence concerning this matter	to the following:	
		James G Franklin Jr	
		Name of Person	
		Nexus Security Firm	
		Firm/Company	
	46	500 SW 34th St, 141314	
		Address	
		Gainesville, FL 32608	
		City/State and Zip Code	
	Fra If-mail address: (inklin@nexus-security.org to be used for future annual report notif	ication)
For further information	concerning this matter, please ca	all:	•
James G Franklin	Jr	at (_ 352 _ ₎ _317-0758	
Name	of Person		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	R ADDRESS:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Example C 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

curity Firm my as it now appears on our records.)	
Hability Company)	
were filed on 03/25/2019	and assigned
oility company here:	
lity Company," the designation "LLC" or th	ne abbreviation "L.L.C."
	<u> </u>
4600 SW 34th St, 141314	FH S
Gainesville, FL 32608	ORIDA
ffice address on our records, <u>ent</u> <u>e</u> :	ter the name of the
·	
Enter Florida street address	
	were filed on 03/25/2019 bility company here: lity Company," the designation "LLC" or the 4600 SW 34th St, 141314 Gainesville, FL 32608

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 ameriding 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>	Name	Address	Type of Action
CE <u>O / Man</u> ager	James G Franklin Jr		
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	dress listed for James G Franklin Jr.		
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ective date, if other than the	e date of filing: st be specific and cannot be prior to date of filing or m	(optional)	u 1.5 605 0
te: If the date inserted in this b cument's effective date on the L	lock does not meet the applicable statutory filin	g requirements, this date will not	be listed
ament's circuit due on the c	reputation of state 3 records.		
record specifies a delaye The 90th day after the rec	d effective date, but not an effective toord is filed.	ime, at 12:01 a.m. on the	earlier
led <u>May 07</u>	2019		
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Filing Fee: \$25.00