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| (Requestor's Name) |
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| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| (Address) |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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COVER LETTER

| Division of Co | rporations | | |
|----------------------------|--|--|--|
| SUBJECT: | NINA EXPORT | T. LLC aited 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: | |
| | | 14 HYR HL Name of Herson E×PORT-11C Firm/Company | |
| | 126 SussE | X Rd Address | |
| | Z-/MONTT | City/State and Zip Code 274402 @ Getal Code to be used for future annual report not | AM AM |
| For further information of | concerning this matter, please co | | mean(A) |
| KEMI Name c | y HyR FiC | at (<u>786</u>) <u>479</u> Area Code Daytin | - 5 95 / ne Telephone Number |
| Enclosed is a check for t | he 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) |
| | | | |

Mailing Address:

TO:

Registration Section

Registration Section
Division of Corporations
P.O. Box 6327

Tallahassee. FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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| NINA EXPORT. L | 1. 22 SE |
|---|---|
| (Name of the Limited Liability Compa (A Florida Limited I | Liability Company) |
| The Articles of Organization for this Limited Liability Company Florida document number | were filed on <u>03/27/2019</u> and assigned. |
| This amendment is submitted to amend the following: | |
| A. If amending name, enter the new name of the limited liab | |
| The new name must be distinguishable and contain the words "Limited Liabil | |
| The new name must be distinguishable and contain the words "Limited Liabil | lity Company," the designation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | 3116 NW 55th 5T MIAMI: Fl 33142 |
| (Principal office address MUST BE A STREET ADDRESS) | MIAMI: F/ 33142 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | 126 Sussex Ld ELHONTT, NY 11003 |
| B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: | address on our records, enter the name of the new registered |
| Name of New Registered Agent: | Hly Hyrtik |
| New Registered Office Address: 31/6 | NW 55 H 5T Enter Florida street address |
| <u> 21/27</u> | HyrtiL NW 55 H Enter Florida street address Florida 33/42 City Zip Code |
| | |

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 |
|--------------|-------------|---------------------------------------|----------------|
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| | | 7 CATSKILL pre MONROE, NY 10950 | Remove |
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| cument's effective date (| on the Department o | of State's records. | | | | |
| ecord specifies a delayed is filed. | I effective date, but r | not an effective tin | ne. at 12:01 a.m. on t | he earlier of: (b) | The 90th day | after th |
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| | Signature of | t a member or author | red representative of | ı member | (1) | _ \\ |
| | | 1 a member or author 1 14 144R Typed or printed | red representative of a | ı member | 17 : - : | -9 PH 12: |