

| (Requestor's Name) |
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| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| |
| (Business Entity Name) |
| |
| (Document Number) |
| (Document Number) |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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Office Use Only



COVER LETTER

| TO: Registration Sec Division of Corp | | | |
|--|--|---|---|
| CELES ELECTION | ONSULTING LLC | | |
| | | ited Liability Company | · |
| | Amendment and fee(s) are sub | - | |
| | Michael G. Moore | to the following. | |
| | Holmes Fraser PA | Name of Person | |
| | 711 5th Ave. S., Ste. 200 | Firm/Company | |
| | Naples, Florida 34102 | Address | |
| | MichaelGMoore@comcast. | City/State and Zip Code net | |
| | | to be used for future annual report noti | fication) |
| For further information co | ncerning this matter, please ca | all: | |
| Michael G. Moore | | 239 398-6103 | |
| Name of | Person | at () Area Code Daytim | e Telephone Number |
| Enclosed is a check for the | e 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:

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

TO ARTICLES OF ORGANIZATION OF

| NUROK CONSULTING LLC | | | |
|--|--|--|---|
| (Name of the Limi | ted Liability Compa (A Florida Limited | my as it now appear. Liability Company) | on our records.) |
| The Articles of Organization for this Limited L Florida document number L19000106861 This amendment is submitted to amend the fol | iability Company | were filed on | 18/20 P JUL 12 P 3 ng and assigned and assigned ALLANAUSEE, FLORIDA |
| This amendment is subtimed to amend the for | iowing. | | |
| A. If amending name, enter the new name of | of the limited liab | ility company he | <u>re</u> : |
| VANGUARD BUILDERS LLC | | | |
| The new name must be distinguishable and contain the | words "Limited Liabi | lity Company," the de | signation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) | | 190 Seward Ave | |
| | | Naples, Florida | 34109 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | 190 Seward Ave Naples, Florida 2 | |
| B. If amending the registered agent and registered agent and/or the new registered o | or registered of ffice address here HOLMES FRA | e: | our records, enter the name of the nev |
| Name of New Registered Agent: | | | |
| New Registered Office Address: | 711 5th Ave. S. | | |
| | Enter Florida street address | | |
| | Naples | | Florida |
| | | 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|------------------------|--|----------------|
| MGR | Cabassa, Stephanie J | 190 Seward Ave. Naples, Florida 34109 | |
| | | | |
| | | - | □ Remove |
| | | Amend Title and Address | |
| AP | Neurock, Robert D., II | 190 Seward Ave. Naples, Florida 34109 | = Change |
| | | | |
| | | | □ Remove |
| | | Amend Title and Address | |
| - | | | |
| | | | □ Remove |
| | | | Change |
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| | | | |
| | | | □ Remove |
| | | | ☐ Change |
| - | | | D Add |
| | | | Remove |
| | | | Change |

| E. Effective date, if other than the date of filing: (If an effective 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 (3)(Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. |
|--|
| If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. |
| Dated June 25th 2019 |
| Dated June 25th 2019 Stephanic Labasso Signature of a member or authorized representative of a member |
| Stephanie J. Cabassa |
| |
| Typed or printed name of signee |

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Filing Fee: \$25.00