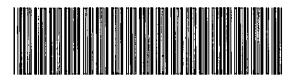
## L1900010865H

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Office Use Only



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S TALLENT

2021 FET 25 FT 8: U.S.



February 15, 2021

CHRISTY PHAN 8221 73RD CT. N PINELLAS PARK, FL 33781

SUBJECT: REAFIVE WORLD WIDE JOIN STOCK LLC

Ref. Number: L19000108654

We have received your document and check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The current name of the entity is as referenced above. Please correct your document accordingly.

The form you submitted is for a FLORIDA PROFIT CORPORATION, but your entity is a FLORIDA LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 921A00003351

Susan Tallent Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

TO: Amendment Section

Division of Corporations

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

	0 -	3.2.3			
NAME OF CORPOR	NATION: REAFIVE	E WORLD (	NIDE JOIN	STOCK	LCC
DOCUMENT NUME	BER: <u>L19000</u>	108654		_	
The enclosed Articles	of Amendment and fee are su	ibmitted for filing.			
Please return all corres	pondence concerning this ma	atter to the following:			
		Name of Contact Person	MAN		
		Firm/ Company	<del></del>		
	8221 73	Address			
	0221 13	Address		<del></del>	
	PINECLAS	ACK FC VCity/ State and Zip Cod	33781		
	E-mail address: (to be u	802 © GA sed for future annual report	notification)	_ ;	
For further information	n concerning this matter, plea	se call:			
CHRIST	Contact Person	at (727	, 560-20	82	
Nameze	Contact Person	Area Co	de & Daytime Telephone N	umber	
Enclosed is a check for	the following amount made	payable to the Florida Depa	artment of State:		
S35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
	ing Address ndment Section		Address Iment Section		

Division of Corporations The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	NORCO WINE JOIN STATE CCC
( <u>Name of the Limited Liability Cor</u> (A Florida Limit	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Compa Florida document number <u>L1900010865</u>	any were filed on $04/26/2019$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited 1	liability company here:
NV CASA LLC	
The new name must be distinguishable and contain the words "Limited L	liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5.05
(Principal office address MUST BE A STREET ADDRESS)	2 <u> </u>
	-2
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	——————————————————————————————————————
B. If amending the registered agent and/or registered offi- agent and/or the new registered office address here:	ice address on our records, <u>enter the name of the new registerec</u>
Name of New Registered Agent:	· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature if changing Registered Age	ent·

## 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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			□Remove
			□Change
			□Add
			☐ Remove
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ecord spo is filed.	ecifies a delayed effect	tive date, but no	t an effective ti	me, at 12:01 a.m. c	n the earlier of: (l	o) The 90th day af	ier the
ted	2/22	1	, 2021	<del></del> '			
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		/	<u> </u>				
		Signature of a	member or autho	orized representative	of a member		