## L20000027616

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

Office Use Only



100363512771

2021 APR 27 AM 8: 4 SECRETARY OF STATE TALLAHASSEF, FI

021 APR 27 PH 1: 2

LUC

APR 2 8 2021

D CONNELL

## Sunshine State Corporate Compliance Company

3458 Lakeshore Drive Tallahassee, Florida 32312

(850) 656-4724

DATE <u>4/27/2021</u>	·	
	*	**WALK IN**
ENTITY NAME TAYLER	R NAKIA & CO. LLC	
DOCUMENT NUMBER_		
	**PLEASE FILE THE ATTACHED AND RETURN**	
xxxxx	Plain Copy	
	Certified Copy	
	Certificate of Status	
**/	PLEASE OBTAIN THE FOLLOWING FOR THE ABOVE ENTITY**	
	Certified Copy of Arts & Amendments	
<del></del>	Certified Copy of Arts & Amendments Complete File (Including Annual Reports)	
	Certificate of Status Reflecting:	
	**APOSTILLE' / NOTARIAL CERTIFICATION**	
COUNTRY OF DESTINATION NUMBER OF CERTIFICATION		
TOTAL OWED \$ 25.00	ACCOUNT # 120160000072 4:0	JW.
Please call Tina at the	above number for any issues or concerns. Thank you so much	6/

## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT: <u>Tayler</u>	Name of Lim	ited 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:		
	Mike Sevik			
		Name of Person		
	ZenBusiness PBC			
		Firm/Company		
	5900 Balcones Dr., STE 5	000		
Address				
	Austin, Texas 78731			
	<del></del>	City/State and Zip Code		
	fulfillment@zenbusiness.co			
For further information o	oncerning this matter, please c	to be used for future annual report not	incation)	
ZenBusiness c/o Mike S	evik	844 493-6249 at () Area Code Daytin		
Name of Person		Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne 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 Addres		Street Address:		
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 632		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Tayler Nakia & Co. LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our records.) Hability Company)	
The Articles of Organization for this Limited Liability Company	were filed on January 22, 2020	and assigned
lorida document number <u>L20000027616</u> .		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	lity company here:	
Noriega Doll LLC		
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		<b>202</b>
Principal office address MUST BE A STREET ADDRESS)		7100 P
	And the Add Shadel	
nter new mailing address, if applicable:		(1)
Mailing address MAY BE A POST OFFICE BOX)	<del> </del>	E ST
		THE ST
. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	ddress on our records, <u>enter the na</u>	ume of the new register
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 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
		· · · · · · · · · · · · · · · · · · ·	□Add
			□Remove
			□Change
	· · · · · · · · · · · · · · · · · · ·	<del></del>	□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			Remove
			Change
			□Add
			□Remove
			□Change

3)

	-				
				-	
<del></del>				<del></del>	<del></del>
		<del></del> .			
<del></del>					
<del></del> -			<del> </del>		
-					
	<del></del>	<del> </del>			<del>-</del>
			<del></del>		
	· <del></del> .		<del></del>		
		•		-	
	·				<del></del>
n effective date is listed, t <b>te:</b> If the date inserted	than the date of fili the date must be specific a d in this block does not e on the Department of	and cannot be prior to t meet the applicab			ling.) Pursuant to 605.020
ecord specifies a delayers filed.	ed effective date, but n	ot an effective tim	e, at 12:01 a.m. or	the earlier of: (b)	The 90th day after the
ted April 26		. 2021	٠,		
	/s/ Tayler Mondy				
	/s/ Tayler Mondy Signature of	a member or authori	zed representative o	f a member	<del></del>

Filing Fee: \$25.00