

120000042975

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

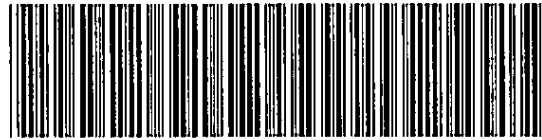
(Business Entity Name)

(Document Number)

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2021 NOV 15 AM 10:55  
CLERK

A. BUTLER  
DEC - 5 2021

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** NATHI APARTMENTS LLC

\_\_\_\_\_  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

WERNER MACEDO

\_\_\_\_\_  
Name of Person

D32 INVEST LLC

\_\_\_\_\_  
Firm/Company

7988 VIA DELLAGIO WAY, SUITE 206

\_\_\_\_\_  
Address

ORLANDO, FL 32819

\_\_\_\_\_  
City/State and Zip Code

werner@d32invest.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

WERNER MACEDO

954 205-1300  
at ( )

\_\_\_\_\_  
Name of Person

Area Code

Daytime 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)

**Mailing Address:**

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

END

2021 NOV 15 AM 10:55

(A Florida Limited Liability Company)

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED  
DATE 02-05-2020 BY 60322 UCBAW

**A. If amending name, enter the new name of the limited liability company here:**

7988 VIA DELL'AGIO WAY

SUITE 206

ORLANDO, FL 32819

7988 VIA DELL'AGIO WAY

SUITE 206

ORLANDO, FL 32819

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

**, Florida**

Civ.

Zip Code

*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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	MAURICIO PENHA	8060 VIA DELLAGIO WAY	<input type="checkbox"/> Add
		SUITE 206	<input checked="" type="checkbox"/> Remove
		ORLANDO, FL 32819	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**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.

Dated October 8th, 2021

Ullrich

Signature of a member or authorized representative of a member

Werner Macedo

Typed or printed name of signee