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COVER LETTER

TO: Registration Sec Division of Corp				
NTS TWO	LLC			
SUBJECT:	Name of Limit	ed Liability Company		
The enclosed Articles of A	Amendment and fee(s) are subn	nitted for filing.		
Please return all correspon	idence concerning this matter to	o the following:		
	Alexis Ridgeway			 -
		Name of Person		
	HGRS Law			
		Firm/Company		
	116 MC David BLVD			- - -
		Address		20 S
	Santa Rosa Beach, FL 324:	59		TAY
		City/State and Zip Code		
	ntsbm@icloud.com	The state of the s	tiention)	
For further information c	E-mail address: (i oncerning this matter, please ea	o be used for future annual report noti	pour	2024 JAN 31 PH 4: 06 SECKETARY OF STATE
Alexis Ridgeway		601 7501058		
Name o	of Person	Area Code Daytim	e Telephone Num	ber
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	(1) \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certif Certif) Filing Fee, icate of Status & ied Copy onal copy is enclosed)
Mailing Addre	ess: Section	Street Address: Registration So	ection	
Registration Division of C	Section Corporations	Division of Co	rporations	
P.O. Box 63	27	The Centre of 2415 N. Monro	Tallahassee oe Street Suit	e 810
Tallahassee	FI 32314	2410 N. MOIN	or other our	5. 5

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NTS TWO, LLC			
(<u>Name of the Limit</u>	ed Liability Company as it now ap A Florida Limited Liability Compar	pears on our records.) ay)	
The Articles of Organization for this Limited Li Florida document number 1.20000050935	ability Company were filed on	02/13/2020	and assigned
This amendment is submitted to amend the follo	owing:		
A. If amending name, enter the new name of	the limited liability compan	y here:	28
The new name must be distinguishable and contain the w Enter new principal offices address, if applic (Principal office address MUST BE A STREE	able:	he designation "LLC" or the	attleviation L.L.C.
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u></u>		\$1ATE
B. If amending the registered agent and/or agent and/or the new registered office addre	egistered office address on o ss here:	ur records, <u>enter the n</u>	ame of the new registero
Name of New Registered Agent:	TMJ17 Holdings, LLC		
New Registered Office Address:	12805 HWY 98 EAST Ente	r Florida street address	
	Inlet Beach	tlorida	32461
	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.

TWO 17 Holdings LLC Marisol Gullo
II Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
AMBR	TMJ17 Holdings, LLC	12805 HWY 98 EAST	 Add
		Inlet Beach F1, 32461	□Remove
		21 CYPRESS BREEZE BLVD S	
MGR	Marisol Gullo	SANTA ROSA BEACH, FL 32459	□Add
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document's effective	: date on the i	Department of	State's reco	rds.					
record specifies a d	elaved effect	ive date, but no	ot an effectiv	ve time, at 12:	01 a.m. on the	earlier of: (b) The 9	Oth day :	after the
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