## L20000 108209

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(8)	usiness Entity Nar	ne)
(D	ocument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to	Filing Officer:	

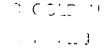
Office Use Only



400344574794

ŭ5/13/20--01021--027 ++25.00

2020 F''' 13 Pil 3: 13



## **COVER LETTER**

TO:

TO: Registration Section Division of Corporation			
SUBJECT: NEWTO	ns Navigat	TUNG HUCKING	LLC
	Name of Lim	tited Liability Company	
The male of Author 6A		to a second	
The enclosed Articles of An	endment and fee(s) are sub	omitted for filing.	
Please return all corresponde	ence concerning this matter	to the following:	
	Allegra C	Name of Person	
	J	Name of Person	
		N C Firm/Company	
	·	Firm/Company	·
	2500 TWIST	ing Sweltgum (	<u>My</u>
	CCOPE, FLO	City/State and Zip Code	
-	GHUFE OF E-mail address?	City/State and Zip Code  City/State and Zip Code	CUM lication)
For further information conc	erning this matter, please c	all:	
Allegra MI	JHCC rson	at ( <u>402</u> ) <u>480</u> - Area Code Daytime	3916 Telephone Number
Enclosed is a check for the f	ollowing amount:		
Ì <b>√3</b> 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 Sec Division of Corp P.O. Box 6327 Tallahassee, FL	porations	Street Address: Registration Sec Division of Corp The Centre of Ta 2415 N. Monroe Tallahassee, FL	porations allahassee : Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	<b>7</b> 1	2300
NEU+LO'S NOVICKHIE	no 1 majorino	2020 ··· 13 PH 3: 13
(Name of the Limited Liability Comp.	any as it now appears on our reco Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L2CCO1085CGL.	.110:	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liab	lity Company," the designation "L	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	1850 Ameri Winter Gara 341787	·
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	1850 AMENC Wunter Acural	LIS MINOR Dr EN, FILNCIA 34-178-
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	
	, l	Florida 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, <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>	<u>Name</u>	Address	Type of Action
MOR	Allegra C. Multer	2500 Twisting Swatgun W	ay 🗆 Add
	·	Lavee, Avida 34761	Remove
			□Change
MOR	Brandon Newton	1850 Americus Minor I	)C □Add
		Wintergarden, Florida	□ Remove
		3-1987	Change
	<del></del>		□Add
			□Remove
		<del></del>	□Change
	-		□Add
		<del></del>	□Remove
			□Change
			🗆 Add
			□Remove
		<u> </u>	□Change
			DAdd
			□Remove
			□ Change

_	
_	
_	
_	
_	<del></del>
<u>vote:</u> 11	date, if other than the date of filing:
record :	ecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated _	May 11th 2000.
	Signature of a member of authorized representative of a member

Filing Fee: \$25.00