

7/14/2021

Division of Corporations

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

L20000275384

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : CONTADORMIAMI.COM INC
Account Number : I20200000130
Phone : (954)345-7888
Fax Number : (786)713-1940

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.**

Email Address: _____

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
THE NAIRO COMPANY, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	03
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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE NAIRO COMPANY, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 09/03/2020 and assigned
Florida document number L20000275384.

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

5537 SHELDON ROAD SUITE E

TAMPA, FL 33615

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

5537 SHELDON ROAD SUITE E

TAMPA, FL 33615

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

VALLINA AND DAUGHTERS LLC

New Registered Office Address:

5537 SHELDON ROAD SUITE E

Enter Florida street address

TAMPA

City

Florida

33615

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.

DocuSigned by:

Maria Valeria Vallina

If Changing Registered Agent, Signature of New Registered Agent

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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>
AMBR	DELGADO, PABLO RUBEN	5537 SHELDON ROAD SUITE E	<input type="checkbox"/> Add
		TAMPA, FL 33615	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	BORDA, BARBARA	5537 SHELDON ROAD SUITE E	<input type="checkbox"/> Add
		TAMPA, FL 33615	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	DELGADO, CARLOS ANIBAL	5537 SHELDON ROAD SUITE E	<input type="checkbox"/> Add
		TAMPA, FL 33615	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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[illegible]

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) ~~the~~ the 90th day after the record is filed.

Dated JULY 9TH, 2021

DocuSigned by:

Pablo Delgado

~~14-00000~~

Signature of a member or authorized representative of a member

PABLO RUBEN DELGADO

Typed or printed name of signee

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NASSAU COUNTY, FLORIDA

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