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## **COVER LETTER**

TO:

Registration Section

Tallahassee, FL 32314

DIVE	ion of Corporations		
SUBJECT: _	Amendement to company	Nebur Consult ited Liability Company	ing ELC
	Name of Lim	ited Liability Company	J
The enclosed	Articles of Amendment and fee(s) are sub	mitted for filing.	
Please return a	all correspondence concerning this matter	to the following:	
	Ruben Paneque		
	<del></del>	Name of Person	<del>-</del>
	Nebur Realty		
	<del></del>	i'irm/Company	<u> </u>
	83 Geneva Dr #620160, Ov	viedo FL 32765	
		Address	
	Oviedo FL 32765		
	<del></del>	City/State and Zip Code	·
	ruben.realtybiz@gmail.com		
For further inf	E-mail address: (1 ormation concerning this matter, please ca	to be used for future annual report	notification)
Ruben Panequ	-		
		305 305-9334 at ()	vtime Telephone Number
	Name of Person	Area Code Da	ytime Telephone Number
Enclosed is a c	heck for the following amount:		
\$25.00 Fil	ing 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)
Regi Divis	ng Address: stration Section sion of Corporations Box 6327		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nebur Consulting LLC

New Registered Agent's Signature, if changing Registered Agent:

( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L20000304540</u> .	any were filed on 9/28/2022 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited l	liability company here:
The new name must be distinguishable and contain the words "Limited I.	iability Company," the designation "L.L.C." or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	MAY 31 PA AHASSEE.
D. If amonding the project of a second control of the second contr	FE 33 09
agent and/or the new registered office address here:	ce address on our records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	Finer Florida street address
	, Florida
	City 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>	Type of Action
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		Oviedo FL 32765	□Remove
			□ Change
			□ Add
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		<del></del>	□Change
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		·	Remove
<del></del>			SSEE GAND
			Likemove
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Effective date, if other than the fan effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	ist be specific block does n	and cannot b	e prior to da	te of filing of	more than 9 ling require	<b>(optior</b> days after finents, this c	line ) Pursu:	ant to 605 ot be liste	5.0207 ( ed as )
e record specifies a delayed effecti d is filed.	ve date, but	not an effec	tive time,	at 12:01 a.n	1. on the ear	lier of: (b)	The 90th	day afte	r the
May 23	<u>.</u>	2022	·						
Dated									
Dated May 25	1								