## 120000335611

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## **COVER LETTER**

ONE TO ZOP		PROPERTY LLC			
SUBJECT:	Name of Limi	ited Liability Company	<del></del>		
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspor	ndence concerning this matter	to the following:			
	EDWIN JEANBAPTISTE				
		Name of Person			
	CNL CAPITAL ENTERPI	RISE LLC			
		Firm/Company	<del></del>		
	PO BOX 771024				
		Address			
	ORLANDO. FL 32877-10	L 32877-1024			
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	·- <u></u>		
	edwinjeanbaptiste@gmail.c		<del>▼'=:;;</del> 、		
For further information co	ncerning this matter, please co	to be used for future annual report notif all:	ication)		
Edwin Jeanbaptiste		407 690-6021			
Name of	Person	Area Code Daytime	: Telephone Number		
Enclosed is a check for th	e following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address		Street Address: Registration Sec	etion		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO: Registration Section
Division of Corporations

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JB HOME PR	OPERTY LLC	
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our reco Liability Company)	ords.)
he Articles of Organization for this Limited Liability Compan	y were filed on 10/30/2021	and assigned
lorida document number L20000335611		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	bility company here:	
NL CAPITAL ENTERPRISE LLC		
he new name must be distinguishable and contain the words "Limited Liab	oility Company," the designation "LI	LC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		021 EC
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		(2) (1) (2) (2) (3) (3) (4) (4) (4) (4) (4) (4) (4) (4) (4) (4
nter new mailing address, if applicable:		0.5% by 1.5% b
	<del></del>	
Mailing address MAY BE A POST OFFICE BOX)		
		<del> </del>
. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, ente	er the name of the new registo
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addi	ress
		Florida
	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.

If Changing Registered Agent, Signature of New Registered Agent

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>	Address	Type of Action
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an effective date is listed, to the inserted of the inserted of the date	the date must be speci	ific and cannot be pi	tor to date of film	ig or more than 90 o	lays after filing.) Pur ents, this date will	suant to 60 not be li	05.020° sted as
ocument's effective date							
record specifies a delay-	ed effective date, b	ut not an effectiv	e time, at 12:01	a.m. on the earli	er of: (b) The 90	th day af	ter the
l is filed.							
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August 4.		<del></del>	<del></del> ·				
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	1//4	<del>-</del>					
	Signatur	of a member or a	uthorized represen	ntative of a membe	r		

Filing Fee: \$25.00