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| (Requ | estor's Name) | |
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| (Addr | ess) | |
| (Addr | ess) | |
| (City/s | State/Zip/Phone | #) |
| PICK-UP | ☐ WAIT | MAIL |
| (Busin | ness Entity Name | e) |
| (Docu | ment Number) | |
| Certified Copies | Certificates of | of Status |
| Special Instructions to Fil | ing Officer: | |
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Office Use Only



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Registration Section

Division of Corporations

TO:

| SUBJECT: NTFL SER | | ited Liability Company | |
|---------------------------------|---|---|---|
| | | | |
| The enclosed Articles of | Amendment and fee(s) are sub | mitted for filing. | |
| Please return all correspo | ondence concerning this matter | to the following: | |
| | LOUINEL NEUS | | |
| | | Name of Person | |
| | NTFL SERVICES LLC | • | |
| | | Firm/Company | |
| | 6419 CANTERLEA DR. | | |
| | | Address | |
| | ORLANDO, FL 32818 | Charles and Time Calls | |
| | 201262 | City/State and Zip Code | |
| | ntxpress2012@gmail.com E-mail address: (| to be used for future annual report not | itication) |
| For further information c | oncerning this matter, please c | all: | |
| LOUINEL NEUS | | at (407) 802-9792 | |
| Name o | r Person | Area Code Daytin | ne Telephone Number |
| Enclosed is a check for the | he following amount: | | |
| ■ \$25.00 Filing Fee | ☐ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed |
| Mailing Addres | | Street Address: | nation |
| Registration ! Division of C | | Registration So Division of Co | |

P.O. Box 6327
Tallahassee, FL 32314

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

| pany as it now appears on our records i | |
|---|---|
| d Liability Company) | |
| ny were filed on <u>11/17/2020</u> | and assigned |
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| ability company here: | |
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| ibility Company," the designation "LLC" or th | e abbreviation "L.L.C," |
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| 6419 CANTERLEA DR. ORLAND | O. FL 32818 |
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| e address on our records, <u>enter the n</u> | ame of the new regis |
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| | |
| Enter Florida street address | |
| | |
| , Florida | Zip Code |
| | ability company here: ability Company," the designation "LLC" or the 6419 CANTERLEA DR. ORLANDO 6419 CANTERLEA DR. ORLANDO e address on our records, enter the new contract address Enter Florida street address Florida |

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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| ffectiv | e date, if other than the date of filing: 6/21/2021 (optional) |
| an effec <u>fote:</u> H | tive 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 605,020, the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as it's effective date on the Department of State's records. |
| record : Lis filec | specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the f. |
| ated | OO/19 202/ Signature of a member of author/ed representative of a member |
| | , , , , , , , , , , , , , , , , , , , |
| | XOULXE/XIEUS |

Typed or printed name of signee