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## COVER LETTER

TO: Registration Section Division of Corpo			
CUDIECT.	NRICH LLC		
SUBJECT:	<del></del>	ited Liability Company	<del> </del>
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	ence concerning this matter	to the following:	
	<u>Lauren</u> N	10 Cabe	
		Name of Person	
	NRICH L		
		Firm/Company	
	1384 Bu	vaundy Drive	
		Address	
	Fut Mu	US FL 33919	) 
	1	CITY FL 33919. City State and Zip Code IC Cabe Chotman 1.	
	Lauvenn	o be used for future annual report no	LOW
For further information con	cerning this matter, please ca	·	micauony
1	cerning this matter, picase ca	<b>111</b> .	
Lauven	Millabe	a <sub>1</sub> (239) 218	<del></del>
Name of P	erson	Area Code Dayti	me Telephone Number
Enclosed is a check for the	following amount:		
☑ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section Status & Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Address:</u> Registration Se	ction	Street Address: Registration S	ection
Division of Cor		Division of C	orporations
P.O. Box 6327 Tallahassee, FL	. 32314	The Centre of 2415 N. Mon	Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N	RICH LL	- <b>じ</b>			
(Name of the Limited I (A I	iability Company Torida Limited Lie	as it now appears on bility Company)	our records.)		
The Articles of Organization for this Limited Liabil Florida document number <u>L200036463</u>		vere filed on	17/2020	and ass	sign
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	e limited liabili	ty company here:			
The new name must be distinguishable and contain the words	"Limited Liability	Company," the design	ation "LLC" or the	abbreviation "L	.L.C."
Enter new principal offices address, if applicable	e:			<del></del>	
(Principal office address MUST BE A STREET A	DDRESS)			<del></del>	<del></del>
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.	<u>x)</u>	1384 Bu Fort My	lvaundy 1 yers FL	D1VL 33919	
B. If amending the registered agent and/or regis agent and/or the new registered office address h		dress on our recor	ds, <u>enter the na</u>	ame of the per	w regist
Name of New Registered Agent:	Laur	en McCabe	<u> </u>	元 元 十	
New Registered Office Address:	1384	Buygun dy Enter Florida s	DYVL treet address	SFEE AI 9	<u> </u>
_	tor	+ Myers	, Florida _	333	19
		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.

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 be or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of A
VP_	Bryan Blackwell	12431 Brantley Commons Ct.	
		Stc. 101	□Remov
		Ft. Myers, FL 33907	(2) Change
			□Remove
			□Change
<del></del>			□Add
			□Remove
			□Change
	<del></del>		□ Add
			□Remove
			Change
			□Add
		<del></del>	□Remove
			□Change
	<del></del>		□ Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del>*************************************</del>
E. Effective date, if other than the date of filing:  (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  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as 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 90th day after the record is filed.
Dated November 28, 2022.  How with the state of a member of authorized representative of a member.  Signature of a member or authorized representative of a member.
Lawen R. McCabe Typed or printed name of signee