200090428

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A. RIVERS

NOV 6 2023

COVER LETTER

TO: Registration S Division of Co			
	L ESTATE LLC		
SUBJECT:	Name of Lim	ited Liability Company	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	MARIA DEL PILAR NA	VAS	
		Name of Person	
	NVS REAL ESTATE LLC		
		Firm/Company	
	3120 CALYPSO DR		
		Address	
	AVON PARK, FL 33825		
		City/State and Zip Code	
	nvsms1@gmail.com E-mail address; (to be used for future annual re	port notification)
For further information	concerning this matter, please c		•
KIMBERLY NAVAS S		305 606- at ()	1545
Name	of Person	Area Code	Daytime 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 enclo	Certificate of Status &
Mailing Addre Registration		<u>Street Add</u> Registrat	<u>Iress:</u> ion Section
Division of (Corporations	Division	of Corporations
P.O. Box 63 Tallahassee,			tre of Tallahassee Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on or Liability Company)	<u>ır records.</u>)	
The Articles of Organization for this Limited Liability Company Florida document number L21000090428	were filed on FEBRUA	ARY 23, 2021	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designat	ion "LLC" or the abb	reviation "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)			· · · · · · · · · · · · · · · · · · ·
		· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our record	s, <u>enter the name</u>	of the new registered
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida stre	eet address	
	City	Florida	Zip Code

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

NVS REAL ESTATE LLC

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 Ferson(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
AMBR	KIMBERLY NAVAS SALAZAR	15756 SW 76TH TERRACE	■Add
		MIAMI, FL 33193	□Remove
			□ Change
			□ Add
			□Remove
			□ Change
			Add
			□Remove
			□ Change
			🗀 Add
			□Remove
		-	□ Change
			DAdd
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			□Change
			□ Add
		 	□Remove
			□Change

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	10/10/2022	
ective date, if other than the da	te of filing:	(optional)
te: If the date inserted in this block	does not meet the applicable statute	ling or more than 90 days after filing.) Pursuant to 605.02 ory filing requirements, this date will not be listed
cument's effective date on the Depa	rtment of State's records.	
	and the second second	
s filed.	ne, but not an effective time, at 12:0	01 a.m. on the earlier of: (b) The 90th day after th
red OCTOBRE 18TH	2023	
(\cdot)	11. 1. 1	

Typed or printed name of signee