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COVER LETTER

Registration Section TO: Division of Corporations

Name of Lime	ted Liability Company	
Amendment and fee(s) are subt	nitted for filing.	
ndence concerning this matter t	to the following:	
BARBARA SANJURJO E	-	
	Name of Person	
BARBARA SANJURJO PA		
	Firm/Company	
2630 SW 28 STREET, SUI	TTE 61	
	Address	
COCONUT GROVE, FLO	RIDA 33133	
	City/State and Zip Code	
	NARA SANJURJO ESQ Name of Person ARA SANJURJO PA Firm/Company W 28 STREET, SUITE 61 Address NUT GROVE, FLORIDA 33123 City/State and Zip Code RA@SANJURJOLAW.COM F-mail address: (to be used for future annual report notification) his matter, please call: at (
F-mail address: (t	o be used for future annual report notif	fication)
incerning this matter, please ca	all:	
	305 370-3990 at ()	
Person	Area Code Dayumo	e Telephone Number
e following amount:		
□ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status &
	Amendment and fee(s) are submodence concerning this matter to BARBARA SANJURJO E BARBARA SANJURJO P. 2630 SW 28 STREET, SUBMARBARA@SANJURJOL F-mail address: (to oncerning this matter, please concerning this matter, please concerning this matter, please concerning this matter.	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: BARBARA SANJURJO ESQ Name of Person

<u>Mailing Address:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: 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

(Name of the Limited Liability (A Florida l	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co Florida document number <u>L21000096888</u>	ompany were filed on 3/1/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
NORDFJORD INVESTILLC		
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	ESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here: Name of New Registered Agent:	office address on our records, <u>enter th</u>	ne name of the new regist
New Registered Office Address:	Enter Florida street address	- : 3
	thier Florida street address . Flor	W.
	City	Zip G ode
New Registered Agent's Signature, if changing Registered	l 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 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>	Name	Address	Type of Action
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			□Change
			
			T.Remove
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BARBARA SANJURJO, ATTORNEY

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