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COVER LETTER

TO:

Registration Section
Division of Corporations

NMAT Rea	d Estate Holdings, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Mary Ann Truax		
		Name of Person	
		Firm/Company	
	7113 Pinebay Blvd		
	Visulational VI 21221	Address	- ,
	Englewood, FL 34224	City/State and Zip Code	<u> </u>
	nmat7113@gmail.com		
	E-mail address: (to be used for future annual report not	ification)
For further information c	oncerning this matter, please c	all:	
Mary Ann Truax		941 228-4373 at ()	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Address:</u> Registration Se	ection
Division of Corporations		Division of Co	rporations
P.O. Box 632 Tallahassee, l		The Centre of 2415 N. Monro	ramanassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NMAT Real Estate Holdings, LLC				
(Name of the Limi	ted Liability Com (A Florida Limite	pany as it now appears on our d Liability Company)	records.)	
The Articles of Organization for this Limited L Florida document number <u>L21000121646</u>	Liability Compar	by were filed on $\frac{3/15/2021}{1}$		and assigned
This amendment is submitted to amend the following	lowing:			
A. If amending name, enter the new name o	of the limited lia	ibility company here:		
no change				
The new name must be distinguishable and contain the	words "Limited Lia	bility Company," the designation	on "LLC" or the abbrev	viation "L.L.C."
Enter new principal offices address, if appli-	cable:	no change		
Principal office address MUST BE A STREE	ET ADDRESS)			
Enter new mailing address, if applicable:		no change		- <u></u>
Mailing address MAY BE A POST OFFICE	<u> BOX)</u>			7
				
B. If amending the registered agent and/or agent and/or the new registered office addre		e address on our records,	enter the name o	f <u>e new registe</u> r
Name of New Registered Agent:	no change	·		
New Registered Office Address:				
		Enter Florida stree	t address	
			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 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>	<u>Address</u>	Type of Action
MGR	Truax Family Trust dtd 4/2/2020	7113 Pinebay Blvd	□Add
		Englewood, FL 34224	_
			□Change
MGR	Mary Ann or Neil Truax	7113 Pinebay Blvd	Add
		Englewood, FL 34224	□Remove
			☐Change
			Add
			Ren
			Cha .
			□Remove
			□Change
			□Add
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			□Add
			□Remove
			□Change

	urrent MGR, The Truax F	amily Trust and ADI	OS the above stated M	IGRS.
Neil and Mary Ann Truax, hu	sband and wife in Joint ten	iancy.		
Further, the newly named MC	iRS, Neil and Mary Ann T	ruax hereby provide	a Transfer on Death (t	 apon
2nd spouse's death) directly to	the Truax Family Trust d	td April 2, 2020.		
				
				
				
			_	
ective date, if other than the effective date is listed, the date must e: If the date inserted in this blument's effective date on the De	be specific and cannot be priced does not meet the appl	or to date of filing or me icable statutory filing		ig.) Pursuant to 605.020
	date, but not an effective	time, at 12:01 a.m. o	on the earlier of: (b)	Γhe 90th day after the
cord specifies a delayed effective stiled. ed January 27 Off listing to	2023 Signature of a member or aut	,		

Filing Fee: \$25.00