## K21000141170

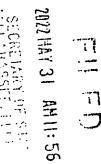
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J. HORNE
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

VOLTIQU SUBJECT:	E USA LLC				
SUBJECT.	Name of Lim	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:			
	Valerie Fasciglione	_			
	<del>-</del> -	Name of Person	<del></del>		
	Alliance Financial Service	s			
		Name of Person  mancial Services  Firm/Company  Parkway STE 125  Address  Beach, FL 33411  City/State and Zip Code ianceafs.com  E-mail address: (to be used for future annual report notification) matter, please call:  at (			
	2101 Vista Parkway STE	25			
		Address	· •		
	West Palm Beach, FL 334	11			
		City/State and Zip Code	<del>.</del>		
	vfascig@allianceafs.com				
	E-mail address: (	to be used for future annual report no	tification)		
For further information of	oncerning this matter, please c	all:			
Valerie Fasciglione		at ( )			
Name o	f Person	Area Code Daytir	me Telephone Number		
Enclosed is a check for the	he following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy		
Mailing Address Registration S					
Division of C	Corporations	Division of Corporations			
P.O. Box 632					
Tallahassee, I	FL 32314	2415 N. Monroe Street, Suite 810			

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VOLTIQUE USA LLC

company has been notified in writing of this change.

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on  $\frac{03/25/2021}{100}$ Florida document number L21000141170 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Nottingham 800 LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address City 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

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>	Name	Address	Type of Action
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			Remove
			Change
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			□ Add
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			□Choras

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