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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MEDEIROS SOUZA CORP

Account Number : I20190000068

: (407)326-8484

Fax Number

: (407)604-6519

**Enter the email address for this business entity to be used for futur annual report mailings. Enter only one email address please. **

Email Address: Adm@medeirossouza.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NONA HOMES LLC

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Tallahassee, Fl. 32314

COVER LETTER

TO: Registration Se Division of Cor	ection porations		
NONA HO	MES 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:	
	THAYS KLOPPERS		
		Name of Person	
	MEDEIROS SOUZA COF	RP.	2021 JUN
		Firm/Company	<u> </u>
845 N GARLAND AVE,		STE 100	30
Address		Address	
	ORLANDO, FL 32801		VI 31715 X
	-	City/State and Zip Code	
	adm@medeirossouza.com		
		to be used for future annual report notific	ation)
For further information of	concerning this matter, please c	all:	
Thays Kloppers		407 326-8484	
Name (of Person	Area Code Daytime	elephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>MailingAddre</u> Registration		<u>StreetAddress:</u> Registration Sect	ion
Division of C		Division of Corpo	
P.O. Box 632	•	The Centre of Ta	llahassee
Tallahassee.	FL 32314	2415 N. Monroe	Street, Suite 810

Tallahassee, FL 32303

From: RUBEM SOUZA

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NONA HOMES LLC			
(Name of the Limi	ted Liability Compa (A Florida Limited	iny as it now appears on our Dability Company)	records.)
The Articles of Organization for this Limited L. Florida document number 1.21000143955		were filed on <u>04/06/2021</u>	andassigned
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	of the limited liab	oility company here:	
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	cable:	845 N GARLAND AVE STE 100	
(Principal office address MUST BE A STREET ADDRES.		ORLANDO, FL 32801	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE	g address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our records,	enter the name of the new regis
Name of New Registered Agent:	MEDEIROS SOUZA CORP		
New Registered Office Address:	845 N GARLAND AVE, STE 100		
		Enter Florida stree	t address
	ORLANDO	<u> </u>	, 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	IVAN SILVA DUARTE	845 N GARLAND AVE. STE 100	□Add
		ORLANDO, FLORIDA 32801	⊟ Remove
			© Change
			□Add
			□Remove
			□Add
			□Remove
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From: RUBEM SOUZA

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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 to the date inserted in this block does not meet the applicable statutory filing requires occurrent's effective date on the Department of State's records.	(optional) 0 days after filing.) Pursuant to 605.020 ments, this date will not be listed a
record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the call is filed	rlier of: (b) The 90th day after th
Oated ORLANDO	