Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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Phone : (239)649-6200 Fax Number : (239)261-3659

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

Email Address:_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NRTMA LLC

والمراجع والمتحالة فالتناث فالمناف فالمناف والمناف والمنافي والمراجع والمتحادث والمناف والمناف والمناف والمناف	والتناقية المستدورات المتراضية بالبدي
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Electronic Filing Menu Corporate Filing Menu

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NRTMA, LLC (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 April 7, 2021 Florida document number <u>L21000147102</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" 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 _, Florida _ 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 hability company has been notified in writing of this change.

It Changing Registered Agent, Signature of New Registered Agent

Fax Services

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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>	Address	Type of Action
MGR	Johnson, Amy	1755 WAVECREST CT	= Add
		MARCO ISLAND, FL 34145	□Remove
			□Change
		 	
			□Remove
			□Change
			DAdd
			□Remove
			[] Change
			□Add
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Effective date, if other than the offen effective date is listed, the date must Note: If the date inserted in this blo document's effective date on the De	be specific and cannot be prior to each does not meet the applicable	late of filing or more than 90 da	
he record specifies a delayed effective ord is filed.	: date, but not an effective time	, at 12:01 a.m. on the earlier	of: (b) The 90th day after th
December 15	2021		
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Typed or printed name of signee