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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : REGISTERED AGENTS INC.

Account Number : I20090000081

: (307)200-2803

Phone Fax Number

: (855)330-1010

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

Email	Address:		
CINGTE	vaniess.	 	 

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **NOVA PERSEY LLC**

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Help

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nova Persey LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	<del></del>
The Articles of Organization for this Limited Liability Company vi Florida document number L21000159408  This amendment is submitted to amend the following:	vere filed on <u>04/06/21</u>	and assigned
A. If amending name, enter the new name of the limited liabil	ity company here:	
A. If affecting flame, energing the new flame of the flames flame.		
The new name must be distinguishable and contain the words "Limited Liabilit	y Company," the designation "LLC" of	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<del></del>
(Principal office address MUST BE A STREET ADDRESS)		SECTION AND ALL MALE
		HASS
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adent and/or the new registered office address here:	ddress on our records, <u>enter th</u>	ne name of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flor	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pa- being filed to merely reflect a change in the registered office of	performance of my duties, and rovided for in Chapter 605, F.	l I am familiar with and S. Or, if this document is

company has been notified in writing of this change.

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>	<u>Name</u>	Address	Type of Action
AMBR	DARIO MORERA, RUBEN	7901 4TH ST N STE 300	🗀 Add
		ST. PETERSBURG, FL 33702	⊠Remove
			□Change
			□ Add
			□Remove
			□ Add
			□Remove
			□Change
			□ Add
			Remove
			[]Change
			□Add
			□Change
-			□Add
			□Remove
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 		7,01	2021
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 	 	 E. FLORIDA	PH 4:
 	 	 	9

Filing Fee: \$25.00