## LZ1000197440

(Requestor's Name)  (Address)	2003713398
(City/State/Zip/Phone #)	08/13/210101100
(Business Entity Name)  (Document Number)	
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## COVER LETTER

Division of Cor			
SUBJECT: <u>NSS</u>	Name of Lim	PL LLC 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:	
	Stephen Gu	errero Name of Person	
	GLEITERO C.	Firm/Compan	<del></del>
	240 Sw 5	ALQ Address	
		City/State and Zip Code	
	E-mail address: (1	the guerrero lau o be used or titure annual report notif	ication)
For further information c	concerning this matter, please co	ill:	()
Stephen Name of	Ferrero	at ( <u>\$\$ \$</u> ) <u>\$ \$ \$ \$ ~ 6</u> Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addres</u> Registration (	Section	Street Address: Registration Sec	
Division of C P.O. Box 632	-	Division of Cor The Centre of T	•

2415 N. Monroe Street. Suite 810

Tallahassee. FL 32303

Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compar (A Florida Limited L	i
	were filed on 4 36 - 2021 and assigned
The Articles of Organization for this Limited Liability Company	were med on and assigned
Florida document number 421000191440	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	ility company here:
The new name must be distinguishable and contain the words "Limited Liabil	ity 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 a agent and/or the new registered office address here:	address on our records, enter the name of the new registe
Name of New Registered Agent: Guerrer	Can Group PLLC;  The Str. Ave 2  Enter Florida street address
New Registered Office Address: 240 SL	Enter Florida street address
Ж:·	Florida 33130
	. Florida 33\30

## 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 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
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		Hialed gardens, Fl 33	018 €Kemove
			□Change
<u>P</u>	Nogrera Family	Higheah Gardens F1 33	L □Add
	Trust	Hialenh Gardens F1 33	3018 THemove
			□Change
AMBR	A) A Property	USS2 Nu 87th PL	CAdd
	Management LLC	Hialenh Gardens F1 33	ot8 <sub>-Remove</sub>
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