LZ1000 199794

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Bı	isiness Entity Na	me)
. (Do	ocument Number)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
		7/16/21 Th

Office Use Only



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21 JUN 18 PH 3: 50

COVER LETTER

Registration Section

TO:

Division of Co	rporations		
Xavi Enter	prise LLC	·	
SUBJECT:	Name of Lin	nited Liability Company	
	Amendment and fee(s) are sub	•	
Please return all correspo	ondence concerning this matter	to the following:	
	Jordan X Nesmith		
		Name of Person	
	Xavi Enterprise LLC		
		Firm/Company	
	3001 Laurel Ridge Cir		
		Address	
	Riviera Beach, FL 33404		
	jordan.nesmith1@yahoo.co	City/State and Zip Code	·
		to be used for future annual report no	tification)
For further information c	concerning this matter, please c	all:	
Jordan Nesmith		954 600-3011 at ()	
Name o	f Person	Area Code Daytir	ne Telephone Number
Enclosed is a check for th	ne following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration Se	ection
Division of C P.O. Box 632	•	Division of Co The Centre of	
Tallahassee, l			be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

21	14 18 PH 3: 50
(Name of the Limited Liability Company as it now appears on (A Florida Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company were filed on	and assigned
lorida document number	
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 design	nation "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:	
M T II MAUDE A BOCK OFFICE BOX	
 If amending the registered agent and/or registered office address on our recorgent and/or the new registered office address here: 	ds, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida s	treet address
	. Florida

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.

Civ

Zip Code

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		Address JUH 18 PH 3: 50 Type of Action	
<u>Title</u>	<u>Name</u>	Address 1 JUH 18 PH 3: 50	Type of Action
MGR	Jordan X Nesmith	3001 Laurel Ridge Cir, Riviera Beach, FL 33404	■Add
			□Remove
			Change
			□Add
			Remove
			Change
			🗆 Add
			□Remove
			Change
			□Remove
			□ Change
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			🗆 Add
			□Remove
			□ Change

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	21 JUH 18 PH 3: 51
	
and an all and the state of the	f Elina. (optional)
effective date is listed, the date must be speci	ffiling:
cord specifies a delayed effective date, b s filed.	but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ed	2021
your flan	re of a member or authorized representative of a member
Jighatu	to or a member of aumornion representative or a member