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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

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N BAY RD DEVELO	)PMFNTS I	I.C		
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			<u> </u>	Dissolution / Withdrawal
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Walk-In	Will Pick Up			Courier

### **COVER LETTER**

N BAY F	RD DEVELOPMENTS, LLC		
<u> </u>	Name of Li	mited Liability Company	
The enclosed Articles of	Name of Limited Liability Company  ed Articles of Amendment and fee(s) are submitted for filing.  In all correspondence concerning this matter to the following:  Eric J. Grabois  Name of Person  Eric J. Grabois, P.L.  Firm/Company  1666 79th Street Cswy Stc. 500  Address  N. Bay Village, FL 33141  City/State and Zip Code  service@graboislaw.com  E-mail address: (to be used for future annual report notification)  Information concerning this matter, please call:  ois  Name of Person  Total address: (to be used for future annual report notification)  In check for the following amount:  Filing Fee Sol. 00 Filing Fee & Certified Copy  Tadditional copy is enclosed)  Service (Certificate of Status & Certified Copy  Tadditional copy is enclosed)  Service Address:  Registration Section  Division of Corporations  Division of Corporations  Division of Corporations  Division of Corporations  The Centre of Tallahassee		
	Eric J. Grabois		
		Name of Person	
	Andress  Name of Limited Liability Company  es of Amendment and fee(s) are submitted for filing.  respondence concerning this matter to the following:  Eric J. Grabois  Name of Person  Eric J. Grabois, P.L.  Firm*Company  1666 79th Street Cswy Stc. 500  Address  N. Bay Village, FL 33141  City/State and Zip Code scrvice@graboislaw.com  E-mail address: (to be used for future annual report notification)  on concerning this matter, please call:  at (305		
	Anne of Limited Liability Company  of Amendment and fee(s) are submitted for filing.  pondence concerning this matter to the following:  Eric J. Grabois  Name of Person  Eric J. Grabois, P.L.  Firm/Company  1666 79th Street Cswy Ste. 500  Address  N. Bay Village, FL 33141  City/State and Zip Code service@graboislaw.com  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:  of Person  at (305		
	1666 79th Street Cswy., S	ite. 500	
		Address	
	N. Bay Village, FL 33141		
		City/State and Zip Code	
	E-mail address:	(to be used for future annual report not	fication)
For further information	concerning this matter, please of	all:	
Eric J. Grabois			
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Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
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		Registration Sec	
P.O. Box 632	orporations 27		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N BAY RD DEVELOPMENTS. 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 06/02/2021 and assigned Florida document number 1.21000254682

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 Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

Cirv

Enter Florida street address

.Florida \_\_

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
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