## L21000350057

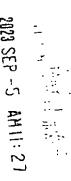
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:





500411099225

06/27/23--01020--002 ++25.00



## **COVER LETTER**

Div	ision of Corp	orations		
SUBJECT:		EVAN INVESTMENT		
SOBJECT:		Name of Limi	ited Liability Company	
The enclosed	d Articles of A	amendment and fee(s) are sub-	mitted for filing.	
Please return	n all correspon	dence concerning this matter (	to the following:	
		MIRIAME FILS-AIME		
			Name of Person	
			Firm/Company	<u></u>
		220 W. ARBOR AVE	20.	
			Address	
		PORT ST LUCIE, FL 3495		
		miriame.realestateagent@gr	City/State and Zip Code	
		E-mail address: (t	to be used for future annual report notific	cation)
For further i	nformation co	ncerning this matter, please ca	ıll:	
MIRIAME	FILS-AIME		772 777-0069 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is	a check for the	e 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)

المناز والمحور

Registration Section

TO:

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



August 10, 2023

MIRIAME FILS-AIME 220 W. ARBOR AVE PORT ST LUCIE. FL 34952

SUBJECT: FAITH & NEVAN INVESTMENT LLC

Ref. Number: L21000350057

We have received your document for FAITH & NEVAN INVESTMENT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.," or the designation "LLC." The following suffixes are no longer acceptable: "Limited Company," "L.C.," and "LC." The abbreviations "Ltd." and "Co.", also are no longer acceptable. Please amend your document accordingly.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6052.

Jessica A Fason Regulatory Specialist II

Letter Number: 223A00018225

SEP 0 5 2023

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FAITH & NEVAN INVESTMENT LLC

New Registered Agent's Signature, if changing Registered Agent:

(Name of the Limited Liabil	lity Company as it now appears on our records.) la Limited Liability Company)	
(A Florid	la Limited Liability Company)	
The Articles of Organization for this Limited Liability C Florida document number <u>L21000350057</u>	Company were filed on 08/03/2021	and assigned
This amendment is submitted to amend the following:	<del></del> .	
A. If amending name, enter the new name of the lin	nited liability company here:	
FAITH & NEVAN MULTI SERVICES LLC		
The new name must be distinguishable and contain the words "Lin	mited Liability Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
		<u> </u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
Manning data test MATI DE ATTOOT OF THE DOTA		· · · ·
	-	
B. If amending the registered agent and/or registere		e of the new regist
gent and/or the new registered office address here:		
		2023
Name of New Registered Agent:		<u> </u>
Name Danistana d Office Addresses		- O - O - O - O - O - O - O - O - O - O
New Registered Office Address:	Enter Florida street address	<del></del>
		<u> </u>
	, Florida	Zip Code

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
			□Remove
			□Change
			□Remove
			☐ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			Change
			□Add
			Remove
			□Change

miriame.realestateagent@gmail.com.	
	-
	·
	2023
	SEP
	<u></u>
	27

Filing Fee: \$25.00

Typed or printed name of signee