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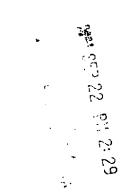
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COVER LETTER

TO: Registration S Division of Co			
Nauti Nic	ks LLC		
NODJECT:	Name of Lin	nited Liability Company	
The enclosed Articles o	of Amendment and fee(s) are sub	mitted for filing.	
Please return all correst	nondence concerning this matter	to the following:	
	Nicholas Yopp		
		Name of Person	
	Nauti Nicks LLC		
		Firm Company	
	2830 W Bay Haven Dr		
		Address	
	Tampa Florida 33611		
		City/State and Zip Code	
	yoppnick@gmail.com E-mail address: (to be used for future annual report noti	fication)
For further information	concerning this matter, please co	•	
Nicholas Yopp		727 4172158	
Name	of Person	ne of Limited Liability Company are submitted for filing. s matter to the following: Name of Person Firm Company n Dr Address fill City/State and Zip Code om ddress: (to be used for future annual report notification) please call: at (
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status		

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nauti Nicks LLC	
(<u>Name of the Limited Liability Company as it now a</u> (A Florida Limited Liability Comp	ppears on our records.) any)
The Articles of Organization for this Limited Liability Company were filed o	n <u>9/9/21</u> and assigned
Florida document number L21000399043	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compar	nv here:
The new name must be distinguishable and contain the words "Limited Liability 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)	· SE
	. 2
	. P
Enter new mailing address, if applicable:	. I
(Mailing address MAY BE A POST OFFICE BOX)	- \(\frac{1}{2}\)
	, w
B. If amending the registered agent and/or registered office address on o agent and/or the new registered office address here:	ur records, <u>enter the name of the new register</u>
Name of New Registered Agent:	
New Registered Office Address: Ente.	r Florida street address
	Florido
Cim	, 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.

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
MGR	Nicholas Yopp	2830 W Bay Haven Dr	= Add
		Tampa Fl 33611	□Remove
			□ Change
			□ Add
			□Remove
			□Change
		<u>. </u>	□Add
			□Remove
			☐Change
			
		-	☐Remove
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record specifies a delayed effective data is filed.	e, but not an effective	e time, at 11	2:01 a.m. on the	earlier of: (b)	The 90th o	day after the
20th day of September	2021	·				
			resentative of a n			

Typed or printed name of signee