

121 000 407166

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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21 NOV 15 PM 3:03

T. MATTHEWS

NOV 30 2021

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: N&E Management Holdings LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Elkharia Powell

Name of Person

Firm/Company

515 E Las Olas Boulevard Suite 120

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

Epowell@nandemanagement.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Elkharia Powell

954

666-2076

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

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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

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| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-----------------|--|--|
| MGR | Elkharia Powell | 515 E Las Olas Blvd Suite 120 Ft. Lauderdale, FL | <input checked="" type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
| AMBR | Nigel Kemp | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | 515 E Las Olas Blvd Suite 120 Ft. Lauderdale, FL | <input checked="" type="checkbox"/> Change |
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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