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(Re	questor's Name)	
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Certified Copies	Certificates	of Status
Special Instructions to I	Filing Officer:	
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COVER LETTER

Divi	ision of Cor	porations					
SUBJECT:	NXT PROI	PERTIES LLC					
SOBJECT.	-	Name of Limi	ited Liability Company				
The enclosed	Articles of	Amendment and fee(s) are sub	mitted for tiling.				
Please return	all correspo	ndence concerning this matter	to the following:				
		Jenny Countz					
		<u> </u>	Name of Person	_			
		ZenBusiness Inc					
			Firm/Company				
		5511 Parkerest Dr., Suite 1	03				
			Address	 -		2	
		Austin, TX 78731			32025	2021 OCT 18	-aryx-
		fulfillment@zenbusiness.co	City/State and Zip Code m		SARS ANA	3 18	Lippani Constit
		E-mail address: (t	o be used for future annual report notific	ation)	- 254	<u> </u>	f. g
For further in	formation co	oncerning this matter, please ca	ill:		ري ار-رين	ڣ	الريحة
Jenny Count			844 493-6249 at ()		m m	09	
	Name of	Person		Felephone Numb	ner	-	
Enclosed is a	check for th	e following amount:					
■ \$25.00 Fi	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi	Filing Fed cate of St ed Copy and copy is a	atus &	

MAILING ADDRESS:

;

Registration Section

TO:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Ft. 32314 STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NXT PROPERTIES LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

(A rionda i	Limited Liability Company)	CO CO
The Articles of Organization for this Limited Liability Co		and a Squed
Florida document number 1.21000409048		, (.,
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRE	ESS)	
	-	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addre	ered office address on our record ess here:	s, enter the name of the ne
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addres	y
	Flo	orida Zip Code
New Registered Agent's Signature, if changing Registered		Zip Code
see the latered regards of sugnature, it changing Registered .	Aguitt	

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
AMBR	Kevin Candiotty	2274 Geneva Drive	
		Lakeland, FL 33805-9559	
		Taketano. 117 mater. 27,512	□ Remove
			Change
AMBR	Carla Candiotty	2274 Geneva Dr.	a change
		Lakeland, F1, 33805	B Add
		1.axciana, 11, 5.500.5	□ Remove
			Change
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Tective date, if other than the d	ate of filing:		(optional)	
ite: It the date inserted in this bloc	k does not meet the applic	cable statutory filing req	an 90 days after filing.) Pursuant uirements, this date will not b	to 605.020 e listed a
cument's effective date on the Dep	artment of State's records	i.		
record enesifies a delayed			-1.12.01	1.
record specifies a delayed The 90th day after the reco	d is filed.	ot an errective time	, at 12:01 a.m. on the e	earlier
October []	. 2021	·		
tea				
Ist Varior Con Page				
Ist Vania Care Pare	ignature of a member or auth	orized representative of a	nember	

Page 3 of 3

Filing Fee: \$25.00