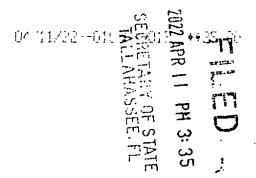
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## **COVER LETTER**

TO: Registration Security Division of Corp			
SUBJECT:	Natavar	1 LCC.	
	Name of Limi	ted Liability Company	<del>-</del>
The enclosed Articles of a	Amendment and fec(s) are subr	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	Brenig	VC Fannist Name of Person	er_
	Nbtay	ION LLC Firm/Company	
	663 Tha	mas Je-Hersov Address	n Way
	Orlando, Bronique E-mail address: (1	City/State and Zip Code  Sun 15+er a  o be used for future annual report notion	GMail. Cam
For further information co	oncerning this matter, please ca	ıll:	•
Brenia Namojo	Person	Area Code Daytim	2 – 7480 e Telephone Number
Enclosed is a check for th	e following amount:		
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF FILED Y Company as it now appears on our records.)
Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on Florida document number \_\_ L 21000 424850 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 "L.L.C." 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 Office Address: Enter Florida street address

### 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.

City

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
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