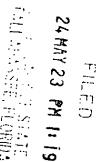
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Office Use Only



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Registration Section sistem of Corporations

SUBJECT	Nilux Exp	eriences LLC		
		Name of Lim	ited Liabinty Company	
useu i	Name of Person Area Code Daytime Telephone Number a cneck for the following amount: Filing Fee \$30.00 Filing Fee & \$55.00 Filing Fee & \$60.00 Filing Fee. Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) Street Address: Gistration Section			
Please return a	ili correspo	ndence concerning this matter	to the following:	
			Name of Person	
			N	·
			i fred v Company	
2621 Summer Creek DY				
			Kissimmee, Florida, 34747	
			filuxexperiences@amait.com	
		E-mail address: (Luz marina Saicedo Name of Person 2621 Summer Creek Dr Address Kissimmee, Florida, 34747 city/State and Zip Code Niluxexperiences@qmail.com mail address: (to be used for future annual report notification) atter, please call: at (845)	
For further int	ormation co	oncerning this matter, please c	all:	
Luz marina S	Salcedo		at (845)	47602 64 -
		f Person	Area Code D	aytime Telephone Number
				-
□ \$25.00 Fi	ling Fee		Certified Copy	Certificate of Status & Certified Copy
		3 :	Street Agare	<u>ss:</u>
Acquisitation Section		Registration Section		
Division of Corporations		•		

Tallahassee, FL 32303

-ATICLES OF ORGANIZATION OF

Nax Experiences LLC		
ne or the Limited Liability (A Florida L.	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con	npany were med on <u>05/17/2024</u>	and assigner.
Florida document number <u>87-3892530</u>	<u>.</u>	
. and amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	d liability company here:	
The new name must be distinguishable and contain the words "Limited	d Liability Company," the designation "LLC" or the abbrev.	iation "L.L.;
Enter new principal offices address, if applicable:	프 팔	24 K
Frincipal office address MUST BE A STREET ADDRE	SS)	2 1
rincipal office address MUST BE A STREET ADDRESS) ter new mailing address, if applicable:	23	
	in an	3 0
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
	ter the new name of the limited liability company here: shable and contain the words "Limited Liability Company," the designation "L.L." or the abbreviation "L.L." es address, if applicable: MUST BE A STREET ADDRESS) ss, if applicable: A POST OFFICE BOX; ered agent and/or registered office address on our records, enter the name of the new registe stered office address here: Enter Florida street aum?	
B. If amending the registered agent and/or registered o agent and/or the new registered office address here:	office address on our records, <u>enter the name of</u>	the new registo
and of New Registered Agent:		
New Registered Office Address:	Enter Floring street gages.	-
	, Florida	breviation "L.L." 24 MAY 23 PM 1: 9

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

I nereny accept the appointment as registered agent and agree to act in this capacity. I juriner agree to comply with provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with a "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

MCR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Nicholas Perez	2621 Summer Creek Dr.	□ Add
			 ✓ Remove
			□Add
			Change
			□Remove
			.IChange
			□ Add
			
			El Change
			
			□Remove
			□Add

□ Remove

mending any (other information, en	ter enange(s) nere:	(Allach additional s	heets. If necessary.)	
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Effective date, if o	other than the date of sted, the date must be specif	filing:		(optional)	
Note: If the date in	sted, the date must be snecif serted in this block does e date on the Departmen	not meet the applicab	date of filing or more than ie statutory tiling requi	i 90 davs after filing.) Pursu irements, this date will n	ant to 60 of the co
record specifies a crd is filed.	delaved effective date, bu	at not an effective time	a. at 12:01 a.m. on the	earlier of: (b) The 90th	dav afte
Dated <u>05/17/</u>	1014.		-		
		12			
	Signature	of a member of authoriz	ed representative of a me	ember	
	(,)	1 Salce of	D.		
		Typed or printed in	name of signee		