6/12/24, 3:49 PM

L210000494864

Division of Corporations
H24000206016 3
Florida Department of State
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From:
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        Account Number : I20140000084
        Phone   : (305)527-6617
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
NOVA EFFECTUS LLC

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JUN 13 2024

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

NOVA EFFECTUS LLC

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

The Articles of Organization for this Limited Liability Company were filed on __11/16/2021__ and assigned
Florida document number __L21000494864__.

This amendment is submitted to amend the following:

A. If amending name, <u>enter the new name of the limited liability company here</u>:

_____

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, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

<u>Name of New Registered Agent</u>: _____

<u>New Registered Office Address</u>: _____

Enter Florida street address

_____, Florida _____

City   Zip Code

<u>New Registered Agent's Signature, if changing Registered Agent</u>:

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

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If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR =   Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	VILANOVA, FRANCO	1549 NE 123RD ST	☐ Add
		NORTH MIAMI, FL 33161	☒ Remove
			☐ Change
MGR	TOP CONSULTING AND MANAGEMENT LLC	1549 NE 123RD ST	☒ Add
		NORTH MIAMI, FL 33161	☐ Remove
			☐ Change
AMBR	VILANOVA, MICAELA	1549 NE 123RD ST	☐ Add
		NORTH MIAMI, FL 33161	☒ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____
_____

E. Effective date, if other than the date of filing: _____ (optional)
   (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
   Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the
   document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b)   The 90th day after the
record is filed.

Dated   JUNE 11TH   2024

_____
Signature of a member or authorized representative of a member

LIV A ACEVEDO LEJTER
_____
Typed or printed name of signee

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