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Florida Department of State

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(((H220002564013)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : VENERABLE CORPORATE AND TRUST SERVICES, LLC

Account Number : I20210000107 Phone : (813)284-4727 Fax Number : (813)436-8460

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: jsampson@venerable.law

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN STUDIO NIDO, LLC

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381, 2,9,2022

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To. FL Dept. of State Page 2 of 5 2022-07-29 13:18:05 GMT

18134368460

From: Venerable Law Firm

COVER LETTER

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TO: Registration So Division of Cor			
	KIDO, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JASON SAMPSON		
		Name of Person	
	VENERABLE CORPORA	ATE AND TRUST SERVICES, I	Daytime Telephone Number 284-4727 Daytime Telephone Number 2860.00 Filing Fee. Certificate of Status &
		Firm/Company	
	301 WEST PLATT STRE	ET. NO. 657	
		Address	
	TAMPA, FLORIDA 3360	Ö	
		City/State and Zip Code	
	jsampson@venerable.law		
			otification)
For further information of	concerning this matter, please o	all:	
JASON SAMPSON		813 284-4727 at ()	
Name o	of Person	Area Code Days	ime Telephone Number
Enclosed is a check for t	the following amount:		
S25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Mailing Addre Registration		Street Address: Registration S	Section
Division of C	Corporations	Division of C	orporations
P.O. Box 63: Tallahassee,		The Centre of 2415 N. Mon	roe Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

company has been notified in writing of this change.

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H22000256401 3

18134368460

STUDIO NIDO, LLC		
(Name of the Limited Liability Comnany a (A Florida Limited Liabi	s it now appears on our records.) lity Company)	
The Articles of Organization for this Limited Liability Company wer	re filed on NOVEMBER 29, 2021	and assigned
Florida document number <u>1.21000506343</u>		
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 C	Company," the designation "LLC" or the abb	reviation "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 add agent and/or the new registered office address here:	ress on our records, <u>enter the name</u>	of the new registered
		2022
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	PROPRO
	Florida	
New Registered Agent's Signature, if changing Registered Agent:	City	CAP CONT.
•	· · · · · · · · · · · · · · · · · · ·	or to assembly with the
I hereby accept the appointment as registered agent and agree to provisions of all statutes relative to the proper and complete per accept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office ade	formance of my duties, and I am fo vided for in Chapter 605, F.S. Or, i	miliar with and f this document is

H22000256401 3

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 HZZ0002564013 or removed from our records:

MGR = Manager AMBR = Authorized Member

To: FL Dept. of State

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	ANDRADE, DANIELA	301 W. PLATT STREET, NO. 657	□ Add
		TAMPA, FL 33606	
			□Change
•			
			Remove
			Change
			□Add
			□Remove
			\ \ \ \ _ \ _ _ \Add
			□Remove
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To: FL Dept of State

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ecord specifies a delayed effect is filed	ive date, bu	it not an ef	factive tim	e, ar 12:(11	am on the	earlier of (l	o) The 90th	day after the
ted H.LY 29			22	. <i>'</i>				
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Filing Fee: \$25.00