

L22000089338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

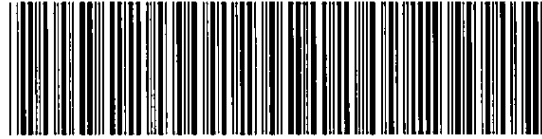
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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2022 MAR 10 AM 9:54
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2022 MAR 10 PM 2:42

CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301
(850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

NOMI DEVELOPMENT, LLC

Signature _____

Requested by: SETH

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

- _____ Art of Inc. File _____
- _____ LTD Partnership File _____
- _____ Foreign Corp. File _____
- _____ L.C. File _____
- _____ Fictitious Name File _____
- _____ Trade/Service Mark _____
- _____ Merger File _____
- _____ Art. of Amend. File _____
- _____ RA Resignation _____
- _____ Dissolution / Withdrawal _____
- _____ Annual Report / Reinstatement _____
- _____ Cert. Copy _____
- _____ Photo Copy _____
- _____ Certificate of Good Standing _____
- _____ Certificate of Status _____
- _____ Certificate of Fictitious Name _____
- _____ Corp Record Search _____
- _____ Officer Search _____
- _____ Fictitious Search _____
- _____ Fictitious Owner Search _____
- _____ Vehicle Search _____
- _____ Driving Record _____
- _____ UCC 1 or 3 File _____
- _____ UCC 11 Search _____
- _____ UCC 11 Retrieval _____
- _____ Courier _____

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: NoMi Development, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Beshoy Rizk, Esquire

Name of Person

Firm/Company

1549 NE 123rd Street

Address

North Miami, Florida 33161

City/State and Zip Code

cyd@bdpalaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cassidy Buckland

305 400-8082
at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

NoMi Development, 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 March 3, 2022 and assigned Florida document number L22000089338.

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:

14340 Biscayne Boulevard

(Principal office address MUST BE A STREET ADDRESS)

North Miami Beach, Florida 33181

Enter new mailing address, if applicable:

14340 Biscayne Boulevard

(Mailing address MAY BE A POST OFFICE BOX)

North Miami Beach, Florida 33181

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

_____, Florida _____
City Zip Code

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.

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Keystone 2020, LLC	14340 Biscayne Boulevard	<input type="checkbox"/> Add
		North Miami Beach, Florida 33181	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	TRIBUCK NoMi, LLC	12700 Biscayne Boulevard	<input type="checkbox"/> Add
		Suite 305	<input type="checkbox"/> Remove
		North Miami, Florida 33181	<input checked="" type="checkbox"/> Change
AMBR	TRIBUCK Tower, LLC	12700 Biscayne Boulevard	<input type="checkbox"/> Add
		Suite 305	<input type="checkbox"/> Remove
		North Miami, Florida 33181	<input checked="" type="checkbox"/> Change
AMBR	Minego, LLC	788 NE 23rd Street	<input type="checkbox"/> Add
		Unit 1601	<input type="checkbox"/> Remove
		Miami, Florida 33137	<input checked="" type="checkbox"/> Change
AMBR	Nae Real Estate Holdings, LLC	1549 NE 123rd Street	<input type="checkbox"/> Add
		North Miami, Florida 33161	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Nomi Holding Group 2 LLC	1549 NE 123rd Street	<input checked="" type="checkbox"/> Add
		North Miami, FL 33161	<input type="checkbox"/> Remove

