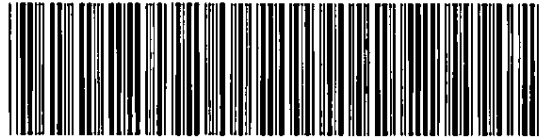


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SECRETARY OF STATE
TALLAHASSEE, FL

2022 MAR -9 AM 9:32

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MAR 10 2022
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(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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NOMI DEVELOPMENT, LLC

- ___ 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 _____

Signature _____

Requested by: SETH

Name _____ Date _____ Time _____

Walk-In _____ Will Pick Up _____

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

Name of Person

305 400-8082
at (_____) _____
Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- \$25.00 Filing Fee
- \$30.00 Filing Fee & Certificate of Status
- \$55.00 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**

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:

(Principal office address MUST BE A STREET ADDRESS)

14340 Biscayne Boulevard

North Miami Beach, Florida 33181

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

14340 Biscayne Boulevard

North Miami Beach, Florida 33181

FILED
2022 MAR -9 AM 9:32
CLERK OF STATE
TALLAHASSEE, FL

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 checked="" type="checkbox"/> Add
		North Miami, Florida 33161	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

