## L22000/04893

	(Requestor's Name)
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	(/ Mai 033)
	(Address)
	(CabulCran File ID)
	(City/State/Zip/Phone #)
PICK-UP	WAIT MAIL
	(Business Entity Name)
<del> </del>	(Document Number)
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Certified Copies	Certificates of Status
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Special Instructions to	Filing Officer:
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Office Use Only



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PENTINED

## **COVER LETTER**

TO: Registration Division of O	Section Corporations		
	MILY HOLDINGS LLC		
SUBJECT:	Name of Li	mited Liability Company	·····
The enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
Please return all corre	spondence concerning this matte	er to the following.	
	STEPHEN GUERRERO		
		Name of Person	
	GUERRERO LAW GRO	OUP PLLC	
	6600 COW PEN RD SU	TTE 260	
		Address	
	MIAMI LAKES FL 3301	14	3
	SGUERRERO@THEGUI	City/State and Zip Code	**************************************
	_	(to be used for future annual report notification)	
For further information	on concerning this matter, please	call:	MA 8: 38
STEPHEN GUERRE	RO	305 4886250	: 38 : 38
Nau	ie of Person	Area Code Daytime Telephone	: Number
Enclosed is a check for	or the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)  Certified Copy	60.00 Filmy Fee. Certificate of Status & Certified Copy additional copy is enclosed)
P.O. Box 6	n Section f Corporations	Street Address: Registration Section Division of Corporations The Centre of Tallahasse 2415 N. Monroe Street, Tallahassee, FL 32303	te

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NG FAMILY HOLDINGS 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  $\frac{02/28/2022}{1}$ and assigned Florida document number 1,22000104893 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)  $\mathbb{C}$ 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

## 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.

Cirv

If Changing Registered Agent, Signature of New Registered Agent

. Florida \_

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

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	IN THE ESTATE OF NG TRUST	416 N. FEDERAL HWY FORT LAUDERDALE.	□Add
		FL 33301	≣Remove
			□Change
AMBR D	DIEGO NG	416 N. FEDERAL HWY FORT LAUDERDALE.	≣Add
		FL 33301	[]Remove
		····	[]Change
		<del></del>	🗆 Add
			□Remove
			□Change
			Add ∵
			iElRemove
		NSSER, FL	Change
			□Remove
			DChange
			DAdd
			□Remove
			□Change

/S/ STEPHEN GUERRI	RO ignature of a member or authorized re	<del>"                                    </del>	<u> </u>
AUGUST 7TH			
s filed.	date, but not an effective time, at	2:01 a.m. on the earlier of: (b	) The 90th day after the
<u>e:</u> If the date inserted in this bloo ument's effective date on the Dep	rk does not meet the applicable sta partment of State's records.	tutory filing requirements, this	s date will not be listed
ective date, if other than the c	late of filing:	(optio	onal)
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Filing Fee: \$25.00