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FILE

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WILLIAMSON, LINDA

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A. HUNT

OX/IX/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: NG FAMILY HOLDINGS 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.

STEPHEN GUERRERO

Name of Person

GUERRERO LAW GROUP PLLC

Firm/Company

6600 COW PEN RD SUITE 260

Address

MIAMI LAKES FL 33014

City/State and Zip Code

SGUERRERO@THEGUERREROLAW.COM

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

For further information concerning this matter, please call:

STEPHEN GUERRERO

305 4886250

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input 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

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TALLAHASSEE, FL
- 3 AM 8:38

NG FAMILY HOLDINGS LLC

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	IN THE ESTATE OF NG TRUST	416 N. FEDERAL HWY FORT LAUDERDALE,	<input type="checkbox"/> Add
		FL 33301	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	DIEGO NG	416 N. FEDERAL HWY FORT LAUDERDALE,	<input checked="" type="checkbox"/> Add
		FL 33301	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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STATE OF FLORIDA
COUNTY OF DADE
ASSISTANT CLERK
JUL 16 2019
AM 8:38

9 AM 8:38
OFFICE OF STATE
TREASURER, FL

08 APR 8:38
INVEST STATE
FBI - MOBILE

(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)

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 AUGUST 7TH 2024

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00