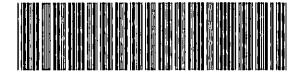
L22000157486

(Re	equestor's Name)	
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	ty/State/Zip/Phone	= #)
PICK-UP	☐ WAIT	MAIL
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Office Use Only



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JIVÍSION OF CORPORATIONS

22 APR 25 PM In 15

T. MATTHEWS
JUN 15 2022

COVER LETTER

ALIBRA Subject:	NDI REALTY LLC		
, obst.e1.	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	GIUSY G ALIBRANDI		
		Name of Person	
	ALIBRANDI REALTY L	LC	
		Firm/Company	
	495 BRICKELL AVE 320	80	
		Address	
	MIAMI FL 33131		
		City/State and Zip Code	
	GIUSY_ALIBRANDI@H		
for further information	E-mail address; (a concerning this matter, please c	to be used for future annual report noti all:	fication)
GIUSY G ALIBRANI		786 405-6126	
Name	of Person		e Telephone Number
Inclosed 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 Taflahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION FILED OF STATE OF STATE OF CORPORATIONS

ALIBRANDI REALTY LLC

22 APR 25 PM 1: 15

	(A riorida Limited Li	абину Сотрану)	
The Articles of Organization for this Limited Florida document number L22000157486	Liability Company v	vere filed on 04/01/2022	and assigned
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liabil	ity company here:	
The new name must be distinguishable and contain the	words "Limited Liabilit	y Company," the designation '	*LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	icable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE	EBOX)		
			~~~ <u>~~</u>
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office ad ess_here:	ldress on our records, <u>er</u>	nter the name of the new registered
Name of New Registered Agent:	GIUSY G ALIBE	RANDI	
New Registered Office Address:	495 BRICKELL	AVE 3208	<u></u>
		Enter Florida street ad	ldress
	МІАМІ		, Florida <u>33131</u>
		City	Zip Code

(Name of the Limited Liability Company as it now appears on our records.)

iew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the voisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability apany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

ii 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>	Address	Type of Action
MGR	GIUSY G ALIBRANDI	495 BRICKELL AVE 3208	
		MIAMI FL 33131	
			■ Change
<del></del>		<del></del>	□Add
			□Remove
			☐ Change
<del></del>			□Add
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			□Remove
			Change

IN THE ARTICLES OF CO	DRPORATION
THE RIGHT NAME IS GIL	JSY G ALIBRANDI
THE ARTICLES OF CORP	PORATIONS SHOW GIUSY G ALIBRANDY THAT IS WRONG
	<del></del>
<del></del>	
fective date, if other than the	04/19/2022 e date of filing: (ontional)
neffective date is listed, the date muster. If the date inserted in this bl	e date of filing:
cument's effective date on the D	Department of State's records.
more than the second	
is filed.	we date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ADDII 10	
ted APRIL 19	Signature of a member or authorized representative of a member
Cinc.	( A1 1 B1 1 A 2 D)