

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : NAPEX FINANCIAL SERVICES LLC  
Account Number : I20210000104  
Phone : (561)305-6436  
Fax Number : (561)880-9444

**\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\***

Email Address: \_\_\_\_\_

**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
NCE RENOVATION SERVICES, LLC.**

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu

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FEB 20 2023

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

NCE RENOVATION SERVICES, 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 04/18/2022 and assigned  
Florida document number 1.22000185266.

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)**

9420 OSPREY BRANCH TRL

UNIT 7

JACKSONVILLE, FL 32257

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

9420 OSPREY BRANCH TRL

UNIT 7

JACKSONVILLE, FL 32257

**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:

NILDO CARVALHO FREIXO

New Registered Office Address:

9420 OSPREY BRANCH TRL UNIT 7

*Enter Florida street address*

JACKSONVILLE

*City*

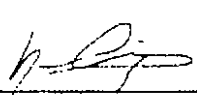
Florida

32257

*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	NILDO CARVALHO FREIXO	9420 OSPREY BRANCH TRL	<input type="checkbox"/> Add
		UNIT 7	<input type="checkbox"/> Remove
		JACKSONVILLE, FL 32257	<input checked="" type="checkbox"/> Change
MGR	CINTIA GERALDO CARVALHO	9420 OSPREY BRANCH TRL	<input checked="" type="checkbox"/> Add
		UNIT 7	<input type="checkbox"/> Remove
		JACKSONVILLE, FL 32257	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(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.

Signature of a member or authorized representative of a member

Typed or printed name of signee