## KA2000187548

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## **COVER LETTER**

Registration Section
Division of Corporations

Tallahassee, FL 32314

;OT,

Nibert LLC			
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Quinn C Nibert		
		Name of Person	
		Firm/Company	
	4870 Deerl Lake Drive E	Suite 2210	
		Address	
	Jacksonville FL 32246	· ·	
	qnibs@me.com	City/State and Zip Code	
		,	tification)
For further information of	oncerning this matter, please c	all:	
	Articles of Amendment and fee(s) are submitted for filing.  all correspondence concerning this matter to the following:    Quinn C Nibert		
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    Ouinn C Nibert			
Enclosed is a check for the	he following amount:		
□ \$25.00 Filing Fee	_	Certified Copy	Certificate of Status & Certified Copy
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P.O. Box 632		The Centre of	-

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2022 MAY 16 AM 8: 21

Nibert LLC

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

SECRETARY OF STATE

The Articles of Organization for this Limited Liabil Florida document number L22000187548	ity Company	were filed on 04/19/2022	and assigned		
This amendment is submitted to amend the following	ng:				
A. If amending name, enter the new name of the	limited liabi	ility company here:			
Quinn Cabot Nibert LLC					
The new name must be distinguishable and contain the words	"Limited Liabil	ity Company," the designatio	n "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable	2:	4870 Deer Lake Drive B			
Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  4870 Deer Lake  Suite 2210  Jacksonville FL 3		Suite 2210			
	Jacksonville FL 32246				
	KO	<del></del>			
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L. 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)  B. If amending the registered agent and/or registered office address on our records, enter the name of the new agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  4870 Deer Lake Drive E  Suite 2210  Jacksonville FL 32246   B. If amending the registered agent and/or registered office address on our records, enter the name of the new agent and/or the new registered Agent:  Name of New Registered Agent:  New Registered Office Address:  4870 Deer Lake Drive E Suite 2210					
agent and/or the new registered office address he		nddress on our records,	enter the name of the new registered		
Name of New Registered Agent:					
New Registered Office Address: 4					
		Enter Florida street	address		
Ja	acksonville		Florida <sup>32246</sup>		
		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 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
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