

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

L220003235593/1458

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

From: Account Name : HISPANUSA INC  
 Account Number : I20070000099  
 Phone : (954)478-2706  
 Fax Number : (954)934-0334

**\*\*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  
 N & L EXPANSION INVESTOR LLC**

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

2022 SEP 19 PM 1:47

2022 SEP 19 PM 4:40  
 SECRETARY OF STATE  
 FALL ACHIEVE FLORIDA

APPROVED  
 AND  
 FILED

### COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT: N & L EXPANSION INVESTOR 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:

NEREIDA LAHIT-BIGNOTT  
 \_\_\_\_\_  
 Name of Person

N & L EXPANSION INVESTOR LLC  
 \_\_\_\_\_  
 Firm/Company

847 SELKIRK ST  
 \_\_\_\_\_  
 Address

WEST PALM BEACH  
 \_\_\_\_\_  
 City/State and Zip Code

FLORIDA 33405  
 \_\_\_\_\_  
 E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NEREIDA LAHIB- BIGNOTT                      561                      201-1266  
 \_\_\_\_\_ at (\_\_\_\_\_) \_\_\_\_\_  
 Name of Person                      Area Code                      Daytime Telephone Number

Enclosed 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  
 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N & L EXPANSION INVESTOR 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 05/24/2022 and assigned Florida document number L22000241458

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)

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 City, Florida Zip Code

APPROVED AND FILED 2022 SEP 19 PM 4:41 REGISTRY OF STATE CLERK OF ORANGE COUNTY FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	GISELLE ABALOS LAHIT- BIGNOTT	847 SELKIRK ST	<input checked="" type="checkbox"/> Add
		WEST PALM BEACH	<input type="checkbox"/> Remove
		FLORIDA 33405	<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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