

h22000274137

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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2022 DEC -8 AM 10:26
SECRETARY OF THE
TREASURY

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: DE NINOSKA, 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:

DENISSE NINOSKA

Name of Person

DE NINOSKA, LLC

Firm/Company

1084 MANILLA LN

Address

PUNTA GORDA, FL 33983

City/State and Zip Code

MULTISERVICIOSLATINOAMERICA@YAHOO.COM

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

2022 DEC -8 AM 10:26
RECEIVED
CORPORATE
SECTION

For further information concerning this matter, please call:

DENISSE N. HEMPEL

941 763-0876
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

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

DE NINOSKA 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 06/16/2022 and assigned
Florida document number L22000274137.

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:

DENISSE NINOSKA HEMPEL

New Registered Office Address:

1084 MANILLA LN

Enter Florida street address

PUNTA GORDA

City

Florida 33983

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>
Pres	Denisse Ninoska Hempel	1084 Manilla Ln, Punta Gorda, FL 33983	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

2022 DEC 8 AM 10:26
SECRETARY OF STATE
OFFICE OF THE CLERK

2022 DEC -8 AM 10:26
SOPHIA
FALLON

2022 DEC -8 Fri 10:26
 2022 DEC -8 Fri 10:26
 2022 DEC -8 Fri 10:26

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

Robert D. Hempel
Typed or printed name of signee