L220030816

(Re	equestor's Name)	
(Ad	ldress)	
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COVER LETTER

TO: Registration Se Division of Cor		•.	
Namaste No	eighbor LLC		
NUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
	ndence concerning this matter	-	
	Harrischandra Jadonath		
		Name of Person	
	Namaste Neighbor LLC		
		Firm/Company	
	3611 Cheswick Drive		
		Address	
	Ocoee, Florida 34761		
	hjadonath@gmail.com	City/State and Zip Code	
	· •	to be used for future annual report notifica-	ation)
For further information co	oncerning this matter, please ca	all:	
Harrischandra Jadonath		407 267-0737	
Name of	Person	at () Area Code Daytime T	Celephone Number
Enclosed is a check for th	e 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 S		<u>Street Address:</u> Registration Secti	on

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO **OF**

ARTICLES OF ORGANIZATION Namaste Neighbor LLC

(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	: 20
The Articles of Organization for this Limited Liability Company Florida document number L22000308816	were filed on July 11, 2022	and assigned
This amendment is submitted to amend the following:		•
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1317 Edgewater Drive	
Principal office address MUST BE A STREET ADDRESS)	Suite 3597	
	Orlando, Florida 32804	-
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the na</u>	me of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	· ·
·	, Florida	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u> </u>			□Add
			□Remove
			□Change
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Note: If the date inserted i	than the date of filing:
If the record specifies a delayed record is filed.	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	. 2023
	think ID
	Signature of member or authorized representative of a member
Harrischandra J	Jadonath
	Typed or printed name of signee

Filing Fee: \$25.00