## Florida Department of State

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : ALVAREZ, SUAZO & ASSOCIATES

Account Number : 120130000075

: (305)388-7028

Phone Fax Number

: (305)479-2705

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

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEJ SOLUTIONS GROUP LLC

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C. BRUMBLEY

## ARTICLES OF AMENDMENT TO

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NEJ SOLUTIONS GROUP LLC				VOV.	TI
(Name of the Limited	TASS O				
The Articles of Organization for this Limited Liab	bility Company	were filed on 07/26/	2022	SF and ssign	nod-
Florida document number L22000330079	·			· — <b>· · · · · · · · · · · · · · · · · ·</b>	
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t	he limited lighi	ility company here	<b>;</b>		•
<u> </u>					
The new name must be distinguishable and contain the wor	rds "Limited Liabil	ity Company," the desig	gnation "LLC" or	the abbreviation "L.L.	C."
Enter new principal offices address, if applicable:		N/A	_ <del></del>	<del></del> .	
(Principal office address MUST BE A STREET	ADDRESS)	<u> </u>			
Enter new mailing address, if applicable:		N/A			· 
(Mailing address MAY BE A POST OFFICE B	<u>0X)</u>				
B. If amending the registered agent and/or regagent and/or the new registered office address	gistered office : <u>here</u> :	address on our reco	ords, <u>enter the</u>	e name of the new	<u>registered</u>
Name of New Registered Agent:	N/A				<u>.</u>
New Registered Office Address:					
		Enter Florida	street address		w registered
	<del></del>	City	, Floric	daZin Code	
New Registered Agent's Signature, if changing Re	egistered Agent:	•			
New Resistant Section of Control			manish I filmoh	or acree to compl	v with the

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
AMBR	NEJAMKIS, LUCAS P	7951 RIVIERA BLVD, 101	□Add '
	75.5	MIRAMAR, FL 33023	■Remove
			☐ Change
MGR	SUAZO, TIM	7951 RIVIERA BLVD, 101	
		MIRAMAR, FL 33023	□Remove
			☐Change
			□Remove
			☐ Change
			□Add
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fective date, if other than the un effective date is listed, the date in this in the date in this is cument's effective date on the	block does not	meet the applica	o date of filing or n ble statutory filir	ore than 90 days	ptional) after filing.) Pursuant this date will not b	to 605.02 e listed
ecord specifies a delayed effect is filed.	ive date, but no	t an effective tin	ne, at 12:01 a.m.	on the earlier of	f. (b) The 90th day	y after tl
August 8		2022	·			
	Juni	mmed	_ \			,
	_		rised representativ			

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