L22000504865

(Requestor's Name)				
(Address)				
(Address)				
(Cit	ty/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Bu	isiness Entity Nan	ne)		
(Document Number)				
Certified Copies	_ Certificates	of Status		
Special Instructions to Filing Officer:				

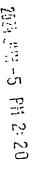
Office Use Only



700430905657

06/05/24--01009--017 **80.00

K424



COVER LETTER

TO: Registration Section Division of Corporations NBQ PROPERTY MANAGEMENT LLC. SUBJECT: 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: Anthony Rolan Name of Person NBQ Property Management Firm/Company 111 North Orange Ave. Address Orlando, FL 32801 City/State and Zip Code Info@nbqpropertymanagement.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Anthony Rolan Daytime Telephone Number Name of Person Enclosed is a check for the following amount: □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & ■ \$60.00 Filing Fee, □ \$25.00 Filing Fee Certificate of Status & Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (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

(Name of the Limited (A	Liability Company as it now appears on our record Florida Limited Liability Company)	<u>s.</u>)
The Articles of Organization for this Limited Liab Florida document number <u>L22000504865</u>	ility Company were filed on 11/30/2022	and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, <u>enter the new name of th</u>	e limited liability company here:	
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation "LLC	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET &	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u></u>	
B. If amending the registered agent and/or regi agent and/or the new registered office address b		the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		orida Zip Code
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

NIDZY DOZYDCIOTY AZAMAZICKICKICKIC

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.

را

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
AR Jamilah Pullins		1941 Valley Forge Drive	□Add
		Saint Cloud, FL 34769	
			□Change
		·	□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			☐ Change
			□∧dd
			□Remove
			☐ Clange
			Remove 2

If amending any other information	tion, enter change(s) here: (Attach additional sheets, if	necessary.)
	. •	
·		
		
·		
		.
Effective date, if other than the	date of filing:(o	optional)
Note: If the date inserted in this blo document's effective date on the Do	ock does not meet the applicable statutory filing requirements epartment of State's records.	, this date will not be listed as th
ord is filed.	e date, but not an effective time, at 12:01 a.m. on the earlier o	f: (b) The 90th day after the
Dated May 18	. 2024	
		() ~ ~ ?
- Min	Signature of a member or authorized representative of a member	- (3)
Anthony Rolan	Typed or printed name of signee	<u>.</u>
	Typed or printed name or signed	PH 12
		- A 20