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(Re	questor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

(x,y) = (x,y) + (y,y) = (y,y)

Registration Section
Division of Corporations

Tallahassee, FL 32314

TO:

SUBJECT:	NAW Capital LLC			
<u>-</u>	Name of Lir	nited Liability Company	 	
The enclosed Article	es of Amendment and fee(s) are sui	bmitted for filing.		
Please return all corr	respondence concerning this matter	r to the following:		
	Nicholas	A. Watson		
		Name of Person		
		Firm/Company	·	
1011 East Cumberland Ave., Unit 1411				
Tampa, FL 33602				
City/State and Zip Code				
		nflcre@gmail.com		
	E-mail address:	(to be used for future annual report no	otification)	
For further informati	ion concerning this matter, please of	call:		
Nick Watson		321 960-1810 at ()		
Na	ame of Person	Area Code Dayti	me Telephone Number	
Enclosed is a check	for the following amount:			
□ \$25.00 Filing Fo	ce \$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)	
<u>Mailing Ad</u> Registrati		Street Address: Registration S	ection	
Registration Section Division of Corporations		Division of Corporations		
P.O. Box 6327		The Centre of Tallahassee		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NAW Capita			2001 000
(Name of the Limi	ted Liability Compan (A Florida Limited Li	y as it now appears of ability Company)	1 our records: 3021 007 11 65 2: 43
The Articles of Organization for this Limited L Florida document number	iability Company v	vere filed on01/	S
This amendment is submitted to amend the foll	owing:		
A. If amending name, enter the new name o	f the limited liabil	ity company here:	
Nicholas A. Watson LLC			
The new name must be distinguishable and contain the v	vords "Limited Liabilit	y Company," the desig	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		1011 East Cumberland Ave	
(Principal office address MUST BE A STREE		Unit 1411	
		Tampa, FL 33602	
Enter new mailing address, if applicable:		1011 East Cum	berland Ave
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>	Unit 1411	
· · · · · · · · · · · · · · · · · · ·		Tampa, FL 33	502
B. If amending the registered agent and/or agent and/or the new registered office address Name of New Registered Agent:	ss here:	Idress on our reco	
New Registered Office Address:	Enter Florida street address		
	Tampa		, Florida 33602
		City	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
I hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi	er and complete p	performance of my	duties, and I am familiar with and

If Changing Registered Agent, Signature of New Registered Agent

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>	Name	Address	Type of Action
			□Add
			Remove
			Change
			□Add
			Remove
			☐ Change
			
			Remove
			☐ Change
			□Remove
			Change
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an effective da ote: If the c	te, if other than the date of ate is listed, the date must be spec date inserted in this block does ffective date on the Departme	fic and cannot be prior not meet the applic	r to date of filing or cable statutory fil		er filing.) Pursuant to 6	
	pecifies a delayed effect day after the record is		ot an effective	e time, at 12:01	a.m. on the ear	rlier of
ated	October 3	2024				
	With	Utal				
	Signatur	e of a member or auth	orized representati	ve of a member	***	
		Nicholas	A. Watson			
_			ed name of signee			

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