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	Requestor's Name)	
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((City/State/Zip/Phone #)	
PICK-UP	☐ WAIT	MAIL
(8	Business Entity Name)	
(1	Document Number)	
Certified Copies	Certificates of 3	Status
Special Instructions	to Filing Officer:	





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COVER LETTER

TO:

TO: Registration Se Division of Cor			
N R P REAL	TY LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Ivan Parron		
		Name of Person	
	PARRON LAW		
		Firm/Company	
	8151 SW 143rd St		213
		Address	
	Palmetto Bay, Fl. 33158		
		City/State and Zip Code	:
	ip@parronlaw.com	to be used for future annual report notif	ication)
For further information e	oncerning this matter, please c		C1
Ivan Parron		305 987-2666 at()	
Name o	l Person	Area Code Daytime	Telephone Number
Enclosed is a check for th	ne 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 Addres Registration 9 Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Sec Division of Corp The Centre of T. 2415 N. Monroc	porations
		Tallahassee, FL	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NRP REALTY LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records.) ned Liability Company)	
he Articles of Organization for this Limited Liability Comp	oany were filed on 01/12/2023	and assigned
orida document number 1.23000026594		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited l	liability company here:	
INOSKA RODRIGUEZ LLC		
ne new name must be distinguishable and contain the words "Limited L	iabifity Company," the designation "LLC" or	the abbreviation "L.L.C."
ather new reinvited offices address if applicables		
nter new principal offices address, if applicable:		
<u> Principal office address MUST BE A STREET ADDRESS</u>	ž	<u></u>
		•
		• •
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BON		
		- .
	· · · · · · · · · · · · · · · · · · ·	
3. If amending the registered agent and/or registered offigent and/or the new registered office address here:	ice address on our records, <u>enter the</u>	name of the new reg
Name of New Registered Agent:		· · · · · · · · · · · · · · · · · · ·
New Registered Office Address:	Emer Florida street address	
	, Floric	la
	(III).	773 L OGC

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>	Type of Action
			□Add
			□Remove
			□Add
			□Remove
			□Change
			•
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	(optional)  not be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 tithe applicable statutory filing requirements, this date will not be listed as seconds.
record specifies a delayed effective date, but not an list filed.	effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	2023

Filing Fee: \$25.00