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COVER LETTER

TO:				:
CHDIE				
SUBJE	CIĘ <u> </u>		ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		Iting & More, LLC Name of Limited Liability Company mendment and fee(s) are submitted for filing, dence concerning this matter to the following: Edward P Nobel III Name of Person Firm/Company 4332 SE Cove Lake Circle Apt 303 Address Stuart. Florida, 34997. US City/State and Zip Code eddien@nobelconsultinggroup.com E-mail address: (to be used for future annual report notification) necerning this matter, please call: Person at (
	Nobel Consulting & More. LLC Name of Limited Liability Company Dised Articles of Amendment and fee(s) are submitted for filing. Sturm all correspondence concerning this matter to the following: Edward P Nobel III			
			Firm/Company	
		4332 SE Cove Lake Circle	Apt 303	
			Address	_
		Stuart, Florida, 34997. US		
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		-	•	:6
For furth	her information o			incation)
Edward	P Nobel III			
	Name o	f Person		ne Telephone Number
Enclose	d is a check for t	he following amount:		
□ \$25	.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
			<u> </u>	ection
	Division of C	Corporations	Division of Co	rporations
	P.O. Box 632 Tallahassee,			Tallahassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nobel Consulting & More, LLC	
(<u>Name of the Limited Liabi</u> (A Flori	ility Company as it now appears on our records.) ida Limited Liability Company)
	Company were filed on February 08, 2023 and assigned
Florida document number L23000070257	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	mited liability company here:
he new name must be distinguishable and contain the words "Li	imited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
Principal office address MUST BE A STREET ADD	ORESS)
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or register agent and/or the new registered office address here:	red office address on our records, <u>enter the name of the new regis</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	City 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, 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	Jennifer D'Elia	4332 SE Cove Lake Cir Apt 303	■Add
		Stuart, Fl. 34997 US	□Remove
AMBR	Jennifer D Nobe	4332 SE Cove Lake Cir Apt 303	□Add
		Stuart, Fl. 34997 US	Remove
			□Change
			□Add
			Remove
			□Change
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Effective date, if other than the (If an effective date is listed, the date mu. Note: If the date inserted in this bl document's effective date on the D	st be specific an ock does not i	d cannot be prio meet the appli	cable statutory	or more than 9 filing require	(optiona days after filir ments, this da	I) ig.) Pursuant to 60 te will not be lis)5.0207 sted as
document a effective date of the D	Sparment of a	State 5 records	·-				
ne record specifies a delayed effective ord is filed.	e date, but no	et an effective t	ime, at 12:01 :	a.m. on the ea	rlier of: (b)	The 90th day aft	er the
Dated February 16		2023					
	Signature of a	member or auth	orized represen	tative of a mem	ber	· · · · · · · · · · · · · · · · · · ·	