(shown below) on the top and bottom of all pages of the document.

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H2300016317134BCY

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : MARIA XIMENA MARTINEZ

Account Number : 120220000054

Phone : (786)571-4129

Fax Number : (786)590-1744

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 NU REAL ESTATE LLC

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T. LEMIEUX

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COVER LETTER

(((H23000163171 3)))

TO:	Registration Se Division of Cor			
SUBJE	ECT:	NU REA	AL ESTATE LLC	
() C D ()		Name of Lin	tited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	emitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		ANDRES MARTINEZ		
			Name of Person	
		MODERN SOLUTIONS (GROUP LLC	
			Firm/Company	
		10810 BOYETTE RD # 21	280	
		 	Address	
		RIVERVIEW, FL 33568		
			City/State and Zip Code	lar Tury d'a A Portula de series de de Par d'Administration d'au Parle de la Company de la C
		info@modernsolutionsgroup.net	to be used for future annual report not	Houtian)
For fur	ther information c	oncerning this matter, please o	•	(incanon)
ANDR	ES MARTINEZ		at (786) 571-4129	O EXT 126
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclose	ed is a check for th	ne following amount:		
≡ \$2:	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Address: Registration Sc	ection
Division of Corporations		Division of Co.	rporations	
	P.O. Box 632 Tallahassee, I		The Centre of 7415 N. Monro	Fallahassee be Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

(((H23000163171 3)))

NU REAL ESTATE LLC

(<u>Name of the Limited Liab</u> (A Flor	ility Company as it now ap- ida Limited Liability Compar	pears on our records.)	
The Articles of Organization for this Limited Liability Florida document number	Company were filed on	FEBRUARY 26, 20.	23 and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the li	mited liability company	y here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," t	he designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADI	ORESS)		***************************************
Enter new mailing address, if applicable:		 	
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or register		r records, enter the	name of the new registered
agent and/or the new registered office address here	:		72
No. of State Decision of Assets			. 1
Name of New Registered Agent:			<u></u>
New Registered Office Address:	Futer	Florida street address	<u> </u>
	Liner		
	City	, Florida	Zip Code
New Registered Agent's Signature, if changing Register	red Agent:		
I hereby accept the appointment as registered agen- provisions of all statutes relative to the proper and accept the obligations of my position as registered being filed to merely reflect a change in the registe company has been notified in writing of this change	complete performance agent as provided for i red office address. I he	of my duties, and L in Chapter 605, F.S.	am familiar with and Or, if this document is
	If Changing Registered	Agent, Signature of Nev	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: (((H23000163171 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	CARLOS IVAN SILVA CORREDOR	10810 BOYETTE RD # 2280	□Add
		RIVERVIEW, FL 33568	■Remove
			□Change
AMBR	JUAN DAVID CESPEDES CRUZ	10810 BOYETTE RD # 2280	□Add
		RIVERVIEW, FL 33568	Remove
MBR	ZICAV GROUP LLC	10810 BOYETTE RD # 2280	□Add
		RIVERVIEW, FL 33568	≣Remove
			☐ Change
			□Add
			Remove
,			☐ Change
			□Add
		······································	Remove
		718.	
			□Add
		4.00	□ Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
E. Effective date, if other than the date of filing: (If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.026 Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a document's effective date on the Department of State's records.	07 (3 x t as the
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.	Œ
Dated May 1 , 2023	
Signature of a member or authorized epresentative of a member	
ANDRES MARTINEZ I AUTHORIZED INDIVIDUAL	

Filing Fee: \$25.00

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