

Florida Department of State
Division of Corporations
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
YOUR NEEDLE NURSE, LLC

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From: Yanez Avila



November 13, 2024

FLORIDA DEPARTMENT OF STATE
Division of Corporations

YOUR NEEDLE NURSE, LLC
9370 SW 137TH AVE., APT. 302
MIAMI, FL 33186US

SUBJECT: YOUR NEEDLE NURSE, LLC
REF: L23000089854

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refile the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "Ltd.," and "Co."

The conflict is P19000012181.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tracy L Lemieux
Regulatory Specialist II

FAX Aud. #: H24000376403
Letter Number: 624A00024820

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

YOUR NEEDLE NURSE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 02-27-2023 and assigned Florida document number L23000089854.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

N&W EXPRESS COURIER, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

1820 SW 43rd St Apt 4202 Gainesville, FL 32607

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1820 SW 43rd St Apt 4202 Gainesville, FL 32607

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

ADDRESS CHANGE

New Registered Office Address:

1820 SW 43rd St Apt 4202

Enter Florida street address

GAINESVILLE

City

Florida

32607

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

MGR = Manager
AMBR = Authorized Member

[illegible]

