## L23000122683

(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
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(Document Number)
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## **COVER LÈTTER**

	ration Section on of Corporations				
SUBJECT:	Numberd	Name of Lin	Construction nited Liability Company	Ahl	<u> </u>
			. , .		
The enclosed A	rticles of Amendment	and fee(s) are sul	bmitted for filing.		
Please return all	l correspondence conc	erning this matter	r to the following:		
		<b>ل</b> ون	Name of Person		
		emphard 1	Ly Lydulion Firm/Company	Ш	
	[0601	Lir Micheal	la Place Dr Bonda	Juin	
		Bon	He Jorey H. City/State and Zip Code	34135	
		HULO outlo E-mail address:	to be used for future annual		1)
For further info	rmation concerning th	is matter, please c	call:		
Okum	Name of Person		at ( <u></u>	<i>102 -573</i>   Dayting Telep	hone Number
Enclosed is a ch	eck for the following	amount:			
□ \$25.00 Filii		Filing Fee & ficate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is er		S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303



September 21, 2023

OSHANE NEMBRHARD 10601 SIR MICHAELS PLACE DR BONITA SPRINGS, FL 34135

SUBJECT: NEMBHARD FIBER CONSTRUCTION LLC

Ref. Number: L23000122683

We have received your document for NEMBHARD FIBER CONSTRUCTION LLC and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

OL. 10 2023

Letter Number: 423A00019106

## ARTICLES OF AMENDMENT TO' ARTICLES OF ORGANIZATION OF

Nembhard Fiber Construction 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 and assigned Florida document number
This amendment is submitted to amend the following:
A. If amending name, enter the new name of the limited liability company here:
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:
(Principal office address MUST BE A STREET ADDRESS)
Enter new mailing address, if applicable:  (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:
New Registered Office Address:
Enter Florida street address
, Florida
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

Title	<u>Name</u>	Address	Type of Action
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	U	1001 du Midedo Place Drive Bonila, Garinyo, Llorida	_ <b>X</b> Remove
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al_	therica Linion	10001 Sir Micheals Place Drive	<u>∽</u> □Add
		1001 Sir Micheals Place Drive Bonita Juings Llondon	_ <b>X</b> Remove
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. If amend	ing any other	information,	, enter chan	ge(s) here:	(Attach add	litional shee	ts, if neces	sary.)		
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Effective	date, if other	than the date	e of filing:				(optior	nal)		
(If an effective Note: If t	date, if other we date is listed, the date inserted is effective date	he date must be s I in this block d	pecific and can loes not meet	the applicab			days after fi	ling.) Pursua		
he record sp ord is filed.	occifies a delay	d effective date	e, but not an	effective tim	e, at 12:01 a.	m. on the ear	lier of: (b)	The 90th	day after	the
Dated 1	<u>/3/2023</u>		· _		. •					
·			ature of a men	hber or authori	zed representa	tive of a memb				
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Filing Fee: \$25.00