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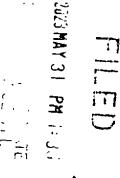
(Requestor's Name)
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PICK-UP WAIT MAIL
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(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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Special Instructions to Filing Officer:





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COVER LETTER

TO:	Registration Sec Division of Corp			
cinstr	NORTHER	N TOWER LLC		
SUBJE	C1:	Name of Lim	ited Liability Company	
The enc	closed Articles of a	Amendment and fee(s) are sub	mitted for tiling.	
Please 1	return all correspo	ndence concerning this matter	to the following:	
		GUILHERME SILVA		
			Name of Person	
			Firm/Company	
		4885 ROMEO CIR		
			Address	
		KISSIMMEE, FL 34746		
		mvtaxservices@gmail.com	City/State and Zip Code	
		E-mail address: (to be used for future annual report	notification)
For fur	ther information co	oncerning this matter, please of	all:	
GUILE	HERME SILVA		508 498-034	
	Name o	f Person	Area Code Da	ytime 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)	☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Addres Registration S		Street Addres Registration	

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

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NORTHERN TOWEL LLC		
(<u>Name of the Limite</u> (d Liability Company as it now appears on our A Florida Limited Liability Company)	records.)
The Articles of Organization for this Limited Lia	ability Company were filed on 04/20/2023	and assigned
Florida document number L23000195773	·	
This amendment is submitted to amend the follo	wing:	
A. If amending name, enter the new name of	the limited liability company here:	
NORTHERN TOWER LLC		
The new name must be distinguishable and contain the we	ords "Limited Liability Company," the designation	n"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ıble:	7625
(Principal office address MUST BE A STREE)		
, in the second		ω ; !
		P
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE I	BOX)	
•		
B. If amending the registered agent and/or re		enter the name of the new regi
agent and/or the new registered office addres	<u>s here</u> :	
Name of New Paristrand Assess		
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street	e and describe
	Enter v toriau Street	aduress
	Cin	, Florida Zip Code
	(IIÌ.	гир с оне

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
			Remove
			Change
			Remove
			☐ Change
			□Add
			□Remove
			□ Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

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ffective date, if other than the date an effective date is listed, the date must be slote: If the date inserted in this block occument's effective date on the Depart	oes not meet the applicab	date of filing or more than 90 cle statutory filing requirem	(optional) days after filing.) Pursuant to 605.020 ents. this date will not be listed a
e record specifies a delayed eff The 90th day after the record		an effective time, at 1	2:01 a.m. on the earlier o
The sour day area are record			
ated MAY 22	2023	. •	
ated MAY 22	:	Local representative of a member	

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