

623000281687

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

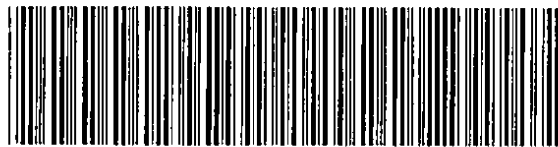
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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06/23/23--01020--009 **25.00

FILED
2023 JUN 23 PM 4:46
SECRETARY OF STATE
TALLAHASSEE, FL

Waf

COVER LETTER

TO: Registration Section
Division of Corporations
N & L LLS LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

NIOBEL VALDES

Name of Person

Firm/Company

9122 SW 8TH TER

Address

MIAMI, FL 33174

City/State and Zip Code

NIOBEL305@YAHOO.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

NIOBEL VALDES

786

367 3861

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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 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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

N & L L L S 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 06/12/2023 and assigned
Florida document number NONE.

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)

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2023 JUN 23 PM 4:45
SECRETARY OF STATE
TALLAHASSEE, FL

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

City

Florida

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 all 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>	<u>Address</u>	<u>Type of Action</u>
MGR	NIOBEL VALDES	9122 SW 8TH TER MIAMI, FL 33174	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	LILIANA SOSA	9122 SW 8TH TER MIAMI, FL 33174	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

NIOBEL VALDES IS REGISTERED AGENT AND MAGR. PLEASE REMOVE LILIANA SOSA SHE WAS
ADDED BY MISTAKE.

E. Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be the date of the filing of the application with the USPTO.)

(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 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated _____, _____

x hup

Signature of a member or authorized representative of a member

* Niobel Valdes Gutierrez.

Typed or printed name of signee

Florida

COL



V432-620-91-342-0

VALDES GUTIERREZ

2 NIOBEL

9122 SW 8TH TER

MIAMI, FL 33174

009 09/22/1991 155X M

40 EXP: 09/22/2024 15 HGT 5'-08"

17 REST E 96 END NONE

SAFE DRIVER

4th ISS 03/23/2016

500 213211151539

REPLACED 11/15/2021

Operation of a motor vehicle constitutes consent to any sobriety test required by law



The State
of Florida
retains all
property
rights herein.
092294

Rev.
03/01/2020



CLASS: A - Any Tractor/Trailer with a GVWR of 26,001 lbs. or more

REST. E-Auto Transmission (CIV)

END- Name

REPLACEMENT LICENSE REQUIRED WITHIN 30 DAYS
OF ADDRESS OR NAME CHANGE
WWW.FLHSMV.GOV

Florida

DRIVER LICENSE



S226-520-92-683-0

CLASS E



1 SOSA CRUZ
2 LILIANA

3 9112 SW 8 TH TER
4 MIAMI, FL 33174-4467

5 DOB 05/23/1992 11 SEX F

6 EXP 05/23/2025 18 HGT 5'-05"

7 REST NONE 9 END NONE

SAFE DRIVER

46 ISS 10/24/2017

500 631806190378

REPLACED 06/19/2018

Operation of a motor vehicle constitutes
consent to any sobriety test required by law

[Signature]



21 0100340000718108



REST: None

END: None

CLASS: E - Any non-commercial veh with a GVWR < 26,001 lbs. or any RV

The state of FL retains all property rights herein



03/23/1997

