## L23000434752

Ch ioliania

(Re	equestor's Name)	
(Ac	idress)	
,	·	
(Ac	idress)	· <del>-</del>
(0)	(C) - 1 - 17 - 17   - 1	- 40
(Ul	ty/State/Zip/Phone	e #)
PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Oc	ocument Number)	
(00	edinent Rambery	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer.	
	<u> </u>	
<del></del> ·	Office Use On	h.



000417135200

10/10/23--01035--023 ++25.00



## **COVER LETTER**

TO:

Tallahassee, FL 32314

TO: R	tegistration Sect Division of Corp	tion orations			
erth trzy	386 Nomi Ll	.C			
SUBJEC'	ı:	Name of Limi	ited Liability Company		
The enclos	sed Articles of A	mendment and fee(s) are sub-	mitted for filing.		
Please retu	ırn all correspon	dence concerning this matter	to the following:		
		JORGE BLANCO			
			Name of Person	-11-1-	<del></del>
		CAPITAL BROKERS LLC	2		
		***************************************	Firm/Company		
		19790 W DIXIE HWY, SU	JITE 1001		
			Address		
		MIAMI, FL 33180			
			City/State and Zip Code		
		financial@capitalbrokersusa			
			to be used for future annual re	port notification)	
For furthe	r information co	neerning this matter, please co	ıll:		
CHRISTI	AN GIRALDO		305 9331		
	Name of	Person	at () Area Code	Daytime Telepho	one Number
Enclosed i	is a check for the	following amount:			
<b>■ \$2</b> 5.0	0 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)
	Jailing Address: Registration Se		<u>Street Ade</u> Registra	dress: tion Section	
1	Division of Co	rporations	Division	of Corporation	
I.	P.O. Box 6327	•	The Cen	tre of Tallahas	ssee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 GCT 10 PH 5: 34

386 Nomi 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  $\frac{9/19/2023}{}$ and assigned Florida document number  $\underline{L23000434752}$ 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." N/A Enter new principal offices address, if applicable: N/A (Principal office address MUST BE A STREET ADDRESS)

N/A

N/A

N/A

N/A

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:

	City	Zip Code	
	N/A	, Florida <sup>N/A</sup>	
	Enter Florida street address		
New Registered Office Address:	N/A		
Name of New Registered Agent:	N/A		

## New Registered Agent's Signature, if changing Registered Agent:

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

N/A

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> <u>Address</u> <u>T</u>	Cype of Action
MGRM MARCELO PICCIOLO 19790 W DIXIE HWY, SUITE 1001	_ <b>≡</b> Add
MIAMI, FL 33180	_ 🗆 Remove
N/A	_ [] Change
N/A N/A N/A	_ □Add
N/A	_ □Remove
N/A	_ ∐Change
N/A N/A N/A	_ □Add
N/A	_ □Remove
N/A	_ □Change
N/A N/A N/A	□Add
N/A	□Remove
N/A	_ _ □Change
N/A N/A N/A	_ □Add
N/A	□Remove
N/A	_ □Change
N/A N/A N/A	_ □Add
N/A	_ □Remove
N/A	_ □Change

N/	A
N/.	
N/	Α
_	Λ
N/	Λ
N/.	Λ
N/	Α
N/	Ά
N/.	Λ
N/	Ά
N/	Ά
N/	'A
N/	Ά
N/	'A
N/	Ά
an effec <u>{ote:</u> If	te date, if other than the date of filing:    N/A
record d is filed	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
Dated _	Signature of a member or authorized representative of a member
	CHRISTIAN GIRALDO

Filing Fee: \$25.00