## L23000444261

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## **COVER LETTER**

Registration Section Division of Corporations

TO:

Nicholas SUBJECT:	Pamphile Consulting LLC		
SUBJECT:	Name of Lim	ited Liability Company	
	of Amendment and fee(s) are sub		
	Nicholas Pamphile	Ç	
		Name of Person	
	Nicholas Pamphile Consul	ting LLC	
		Firm/Company	
	333	30 Fairchild Gardens Ave	
		Address	~;
	Palm Beach Gardens, FL,	33 <b>420</b> Box 31052	Ġ
		City/State and Zip Code	 బ్ర
	nicholaspamphilejp@gmail		·
	E-mail address: (	to be used for future annual report noti-	fication) ;
For further information	n concerning this matter, please c	all:	ភ
Nicholas Pamphile		561 5376396 at ( )	. <del>-</del> -
Name	e of Person		e Telephone Number
Enclosed is a check for	r 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)
P.O. Box 6	n Section Corporations	Street Address: Registration Second Division of Core The Centre of Tallahassee, FL	porations Tallahassee e Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Nicholas Pamphile Consulting LLC	
(Name of the Limited Liability Comps (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Clorida document number <u>L23000444261</u> .	were filed on September 25, 2023 and assigned
his amendment is submitted to amend the following:	
a. If amending name, enter the new name of the limited liab	oility company here:
NJP Enterprises of Palm Beach LLC	27
he new name must be distinguishable and contain the words "Limited Liabi	lity 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)	
Inter new mailing address, if applicable:	3330 Fairchild Gardens Ave, Palm Beach Gardens, FL 33420
Mailing address MAY BE A POST OFFICE BOX)	Box 31052
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, enter the name of the new registe
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Enter Pariau sirvei adaress
	. Florida Zip Code
iew Registered Agent's Signature, if changing Registered Agent	
hereby accept the appointment as registered agent and agrowsions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is

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
			□Add
			□Remove
			Change
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fective date, if other than the denotes the date must be	ate of filing:	(optional) ing or more than 90 days after filing.) Pursuant to 605.02
ote: If the date inserted in this bloc cument's effective date on the Dep	k does not meet the applicable statuto	ry filing requirements, this date will not be listed:
ecord specifies a delayed effective of is filed.	late, but not an effective time, at 12:0	l a.m. on the earlier of: (b) The 90th day after th
ted October 23	2023	