123000466289

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



000418864900

11/13/23--0103:--018 **25.00

11/27/23

SECULIATION PH 1: 30

COVER LETTER

TO: Registration Se Division of Cor				
SUBJECT: NEXUS PI	PM LLC			
SUBJECT.		ited Liability Company	***	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	John Mouzakitis			
		Name of Person		
	NEXUS PPM LLC			
		Firm/Company	<u> </u>	•
	12342 Cascades Pointe Dr	ive		2 0
		Address		2023 NOV 13 SEGILLERY
	Boca Raton, FL 33428			- Fi - OV - Fi
		City/State and Zip Code		· 55 ω •
	john.m@sunrisescheduling.			PH I
	E-mail address: (to be used for future annual report notifi	ication)	PH 1:30
For further information of	concerning this matter, please ca	alt:		m 0
John Mouzakitis		at (646) 884-0415		
Name o	of Person		Telephone Number	
Enclosed is a check for the	he following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Address Registration 9 Division of C P.O. Box 632	Section Corporations	Street Address: Registration Sec Division of Corp The Centre of Ta	oorations	

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEXUS PPM LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our records. nited Liability Company))
The Articles of Organization for this Limited Liability Comp	pany were filed on 10/10/2023	and assigned
Florida document number 1.23000466289		
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 ADDRES	<u></u>	
		623 MOV
		्र व ग
Enter new mailing address, if applicable:		ω
Mailing address MAY BE A POST OFFICE BOX)		29 P 171
		30
B. If amending the registered agent and/or registered of agent and/or the new registered office address here:	fice address on our records, <u>enter t</u>	he name of the new register
Name of New Registered Agent:	12004	
New Registered Office Address:	Enter Florida street address	
	EV	da.
	, Flo	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 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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Christie J Mouzakitis	12342 Cascades Pointe Drive	□ Add
		Boca Raton, FL 33428	Remove
			Change
			□Remove
			□Change
			□Add
			□ Remove
			☐Ghange U
		· · · · · · · · · · · · · · · · · · ·	Add Add Roomove
			□ Change
			□Add
			□ Remove
			Change
			□Add
			☐ Remove

		-
	ATM ATT	-
	···	-
		-
		-
		=
		•
		-
		-
		-
		_
	o 😒	
	17.5 17.5 17.5	-
	<u> </u>	- [
	음식 골	[4] - ::::::::::::::::::::::::::::::::::::

	m 0	-
effective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of fil e: If the date inserted in this block does not meet the applicable statute ument's effective date on the Department of State's records.	(optional) ling or more than 90 days after filing.) Pursuant to 60: ory filing requirements, this date will not be list	5.020 ted a
cord specifies a delayed effective date, but not an effective time, at 12:0 stilled.	01 a.m. on the earlier of: (b) The 90th day afte	r the
ed November 7th 2023		
- HAA		

Typed or printed name of signee