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To:

Division of Corporations

Fax Number : (850)617-6383

from:

Account Name : IDEAS CARVAJAL LLC

Account Number : 120220000006 Phone : (321)333-5565 Fax Number : (407)565-5637

2 th	er the	email	address	for	this	busine	229	entity	to	be	used	for	future
본문	annual	report	: mailin	gs.	Enter	only	one	email	add	res	s ple	ase.	**

mail	Address:			_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NISSI SERVICES & MAINTENANCE LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

M. SOLOMON

JUN - 7 2024

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Corporate Filing Menu

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COVER LETTER

TO: Registration S Division of Co			•	
NISSI SE				
SUBJECT:	Name of Lim	ited Liability Company	***************************************	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
	ondence concerning this matter	·		
	BECERRA BROCHERO,	LEONELA C		
		Name of Person		
	NISSI SERVICES & MAI	INTENANCE LLC		
		Firm/Company		21
	2847 COMMON CRANE	COURT		2024 JUH
		Address		至
	ST CLOUD, FL 34773		7710 MA MO	-7
	7,77	AKII: I		
	ation)			
		to be used for future annual report notifie	ation) (377)	œ
	concerning this matter, please o			
BECERRA BROCHER	RO, LEONBLA C	321 333-5565 #1 ()		
Name	of Person	Area Code Daytime	Telephone Number	
Enclosed is a check for	the following amount:			
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Addr Registration		Street Address: Registration Sect Division of Corp.		

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

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

NISSI SERVICES & MAINTENANCE LLC			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company	and assigned		
Florida document number L24000009692			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abb		
Enter new principal offices address, if applicable:		2024	
(Principal office address MUST BE A STREET ADDRESS)			
		F	
		الماسية المسالة	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		05 .	
		<u> </u>	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name	of the new registered	
Name of New Registered Agent:	·		
New Registered Office Address:			
	Enter Floridu street address		
	, Florida	21- 6-1-	
	Clty	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 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
AMBR	Carrero Silva, Antonio Ramon	2847 Common Crane Court ST Cloud, FL 34773	\ Add
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			□Add
			□Remove
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D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
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	<u> </u>	œ
Note:	tive date, if other than the date of flling: (optional) Firstive 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. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed ment's effective date on the Department of State's records.	0207 (3)(b) id as the
If the reco record is f	erd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after filed.	the
Dated	. 05/23/2024	
	Wa	
	Signature of a member or authorized representative of a member	
	BECERRA BROCHERO, LEONELA C	

Typed or printed name of signee