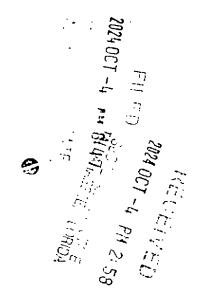
# 

(Req	juestor's Name)	
Add)	iress)	
(Add	dress)	
(City	//State/Zip/Phone #)	
PICK-UP	<b>W</b> AIT	MAIL
(Bus	iness Entity Name)	
(Doc	current Number)	
Certified Copies	Certificates o	of Status
Special Instructions to Filing	g Oificer;	

Office Use Only





## **CORPORATE** ACCESS,

## When you need ACCESS to the world

INC.

236 Fast 6th Avenue. Tallahassee, Florida 32303

P.O. Box 37066 (32315-7066) (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666

### WAIKIN

PICK UP:	JENA 10/4
CERTIFIED COPY	
CUS	
FILING	LLC AMEND
7519 AINSE VENTURE LI	
CORPORATE NAME AND DOCUMEN	(I`#)
CORPORATE NAME AND DOCUMEN	T`#)
CORPORATE NAME AND DOCUMEN	Τ #)
CORPORATE NAME AND DOCUMEN	T #)
CORPORATE NAME AND DOCUMEN	T #)
NSTRUCTIONS:	• **
	PHOTOCOPY  CUS  FILING  7519 AINSE VENTURE LI CORPORATE NAME AND DOCUMENT  CORPORATE NAME AND DOCUMENT

#### **COVER LETTER**

TO: Registration Section

Division of Co	orporations		
	NSE VENTURE LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	Alejandro I. Velez. Esq.		
		Name of Person	
	VIA Lawyers		
	<del></del>	Firm/Company	
	8750 NW 36th Street Suite	250	
		Address	<del></del>
	Doral, Florida 33178		
	<del></del>	City/State and Zip Code	
	alex@vialawyers.com	to be used for future annual report not	ification)
For further information	concerning this matter, please c		,
Alejandro I. Velez, Esc		305 425-1565	
Name of Person		at ()	
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 Addr Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration So Division of Co The Centre of 2415 N. Monro	rporations

Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

17519 AINSE VENTURE LLC		
(Name of the Limit	ed Liability Company as it now appear (A Florida Limited Liability Company)	r <u>s on our records.</u> )
The Articles of Organization for this Limited L Florida document number L24000252630	iability Company were filed on $\frac{06}{2}$	and assigned
This amendment is submitted to amend the foll	owing:	
A. If amending name, enter the new name o	f the limited liability company h	ere:
The new name must be distinguishable and contain the v	words "Limited Liability Company," the c	lesignation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applic	:able:	
(Principal office address MUST BE A STREE	ET ADDRESS)	
		2024 0C1
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
		<u>.</u>
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our i iss here:	ecords, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:	8750 NW 36th Street Suite 250	
New Registered Office Address.	Enter Flo	orida street address
	Doral	Florida 33178
	City	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	YABEYIRE SERVICES INC	4431 28TH AVE SW	
		NAPLES, FL 34116	□Remove
			<b>■</b> Change
			□Add
			□Remove
		<u> </u>	□Change
			□ Add
			□ Remove
		<del></del>	Change
			Remove
			□ Change
			□Add
			□Remove
			Change
		<del> </del>	
			□Remove

YABAYIRE SE	RVICES INC to YA	BEYIRE SERVICES	S INC.		
			-		
<del></del>					
				<u> </u>	
· · · · · · · · · · · · · · · · · · ·			· · · · · · · · · · · · · · · · · · ·		
		<u>.                                    </u>			
<del></del>		• 0.			
,					
•					
n effective date is lister te: If the date inser	ted in this block doe	ific and cannot be prior	able statutory filing red	(optional) han 90 days after filing.) Pursu quirements, this date will n	
ument's checuve c	ate on the Departme	in of State 3 records.			
cord specifies a del s filed.	ayed effective date, b	out not an effective ti	me, at 12:01 a.m. on th	ne earlier of: (b) The 90th	day after the
September 26		, 2024	-11 /		
		1 /	11/		

Typed or printed name of signee