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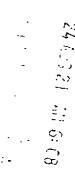
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Nex U Holding Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filling.
Please return all correspondence concerning this matter to the following:
Argenis V. Monien
Firm/Company
11515 Case Maring Way Unit 300
11515 Casa Maning way unit 30° Address Tampa F/ 33635 City/State and Zip Code Victor Quexuboldings. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Arcyclinic V. Morin at (813) 728-5217 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount.
\$\frac{1}{2}\$\$ \$25.00 Filing Fee \text{ \$\subseteq \text{S30.00 Filing Fee \text{ Certificate of Status } \text{ \$\subseteq \text{Certified Copy} \\ \text{tadditional copy is enclosed} \text{ \$\text{Certified Copy} \\ \text{tadditional copy is enclosed} \text{ \$\text{Certified Copy} \\ \text{tadditional copy is enclosed}} \text{ \$\text{Certified Copy} \\ \text{tadditional copy} \text{ \$\text{Certified Copy} \\ \text{tadditional copy} \text{ \$\text{tadditional copy} \text{ \$\text{Topy} \\ \text{tadditional copy} \text{ \$\text{Topy} \\ \text{Topy} \\ \t
Mailing Address: Registration Section Street Address: Registration Section

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

Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Co	mgs LL	n our records.)	
(A Florida Limi	•	, 7	
The Articles of Organization for this Limited Liability Compa	any were filed on	125/202	Yand assigned
The Articles of Organization for this Limited Liability Comp. Florida document number <u>424000286485</u>))	//	_1
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited !	iability company here:		
The new name must be distinguishable and contain the words "Limited L	iability Company," the desig	nation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS,	<u> </u>		ro

		-	
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			2:
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			<u> </u>
B. If amending the registered agent and/or registered officagent and/or the new registered office address here:	ce address on our reco	rds, enter the name	of the new registered
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida s	street address	
		Florida	
	Ciţ		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

Title	<u>Name</u>	Address	Type of Action
<u>146</u> 2	Argenis V. Monier	11615 Cosa Moning Wa Unit 304. Tampa FL 3	<u>и</u> Длаа 3635
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More. If the	te, if other than the date of late is listed, the date must be spec- date inserted in this block doc ffective date on the Departme	es not meet me appreable	e statutory tinng require	inents, this date will not be I	505.0207 (isted as t
e record spec rd is filed.	fies a delayed effective date.	but not an effective time,	, at 12:01 a.m. on the es	rlier of: (b) The 90th day a	fter the
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Dated <u>A U</u>	Just 13	<u>// 2024</u> .			
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	Signatu	Tre of a member or authorize	el representative of a men	ber	

Filing Fee: \$25.00