## 124000414450

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Noble No	otary Network LLC	•	
	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	Natasha Lewis		
		Name of Person	
	Noble Notary Network LLC  Firm/Company  533 Majestice Gardens Blvd  Address  Winter Haven, Fl. 33880  City/State and Zip Code  n.pringle85@gmail.com  E-mail address: (to be used for future annual report notification)  formation concerning this matter, please call:  S  Name of Person  Area Code  Daytime Telephone Number  Check for the following amount:  ling Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee & Certificate of Ce		
		Firm/Company	····
	533 Majestice Gardens Bl	vd	
		Address	<del></del>
	Winter Haven, Fl. 33880		
	<del></del>	City/State and Zip Code	<del></del>
	n.pringle85@gmail.com		
	E-mail address: (	to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
Natasha Lewis		_	
Namo	of Person		ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee		Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Section Corporations 327	Registration Se Division of Cor The Centre of T	rporations

Tallahassee, FL 32303

Registration Section Division of Corporations

TO:



November 25, 2024

NATASHA LEWIS 433 MAJESTIC GARDENS BLVD WINTER HAVEN, FL 33880

SUBJECT: NOBLE NOTARY NETWORK LLC

Ref. Number: L24000419450

We have received your document for NOBLE NOTARY NETWORK LLC and your check(s) totaling \$. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must send the complete Articles of Amendment form I have enclosed a new form.

If you have any questions concerning the filing of your document, please call (850) 245-6000.

Neysa Culligan Regulatory Specialist III

Letter Number: 024A00025746



## ARTICLES OF AMENDMENT TO . ARTICLES OF ORGANIZATION OF

Noble Notary Network LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our record Dability Company)	<u>(s.</u> )
The Articles of Organization for this Limited Liability Company	were filed on September 26, 202	24 and assigned
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 "LLC."  Inter new principal offices address, if applicable:  Principal office address MUST BE A STREET ADDRESS)  Ste B6 #881  Tampa, F1 33647		
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 abbreviation "L.L.C."
Enter new principal offices address, if applicable:	19046 Bruce B Downs Blvd	202
Principal office address MUST BE A STREET ADDRESS)	Ste B6 #881	D: <u>C</u>
	Tampa, Fl 33647	A
Enter new mailing address, if applicable:		<b></b>
Mailing address MAY BE A POST OFFICE BOX)		8: <b>48</b>
		<b>8</b>
3. If amending the registered agent and/or registered office a sgent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>enter</u>	the name of the new regi
New Registered Office Address:	Enter Florida street addres.	is .
	, Flo	orida
<del></del>	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
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Effective date, if other fan effective date is liste Note: If the date inse document's effective of	ed, the date must be rted in this block	specific and ca	unnot be prior t et the applica	o date of filing	g or more than r filing requi:	(option 90 days after firements, this of	ling.) Pursua	int to 605.0 It be listed	0207 ( d as tl
record specifies a de d is filed.	layed effective da	ite, but not an	i effective tii	ne, at 12:01	a.m. on the c	earlier of: (b)	The 90th	day after	the
Dated <u>Januar</u>	y 3/		2025						
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