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COVER LETTER

Division of Cor	porations		
	& SON LLC		
SUBJECT:	Name of Lim	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:	
	Angelo Nobles		
	·	Name of Person	
	NOBLES & SON LLC		
		Firm/Company	
	125 Agate Ct		
		Address	* · · · · · · · · · · · · · · · · · · ·
	ST Augustin , FL 32092		
		City/State and Zip Code	
	noblesson2024@gmail.com		N
		to be used for future annual report notif	ication)
For further information c	oncerning this matter, please c	ail:	
Angelo Nobles		904 874-0080 at ()	
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	ne 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)

TO: Registration Section

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

Street Address:
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

NOBELS & SON LLC			
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our rec Liability Company)	ords.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000431618</u> .	were filed on 10/07/2024	 	_ and assigned
lorida document number			
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
he new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "I	LC" or the abbro	eviation "L.L.C."
Enter new principal offices address, if applicable:			
Principal office address MUST BE A STREET ADDRESS)		<u> </u>	2024 NO
) <u>P</u> (2)	<u> </u>
			V
20 11 26 - P. 11		HAS	£ [
Enter new mailing address, if applicable:		SS	
Mailing address MAY BE A POST OFFICE BOX)		- 1 33	* 0
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		177	7
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	address on our records, <u>en</u> t	ter the name o	of the new regis
Name of New Registered Agent:	1-2-7-10-10		
New Registered Office Address:	Enter Florida street ada		•
	City	Flo ri da	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>	Name	Address	Type of Action
MGR	ALEXANDRINA ASHLEY RUIZ-	125 Agate Ct, St Augustine Fl 32092	■Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			□Add
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			□Remove
			□Change

Comapany er	mail: noblesson2024@gmail.com
company pho	ne # 9048740080
	Step 20 DO DOOR
	
	
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Mostivo data if	other than the date of filing: (optional)
an effective date is l ote: If the date ir	isted, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (ascrited in this block does not meet the applicable statutory filing requirements, this date will not be listed as the date on the Department of State's records.
record specifies a is filed.	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ated	2024
	Signature of a member or authorized representative of a member