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Email	Address:	Ł
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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN NEXT LEVEL TAXPRO'S AND MORE LLC

Certificate of Status	0
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Page Count	04
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Electronic Filing Menu

Corporate Filing Menu

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

NEXT LEVEL TAXPRO'S AND				
(Name of the Lim	ited Liability Comp (A Florida Limited	any as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Florida document number L24000462908	Liability Company	y were filed on 10/31/2	2024	and assigned
This amendment is submitted to amend the fo	lowing;			
A. If amending name, enter the new name	of the limited liab	oility company here:		
NA I		•		
The new name must be distinguishable and contain the	words "Limited Liab	ility Company," the design	ation "LLC" or the at	ibreviation "L.L.C."
Enter new principal offices address, if appli	cable:	NA		a a manage and manage and a particular of the first of a particle state.
(Principal office address MUST BE A STREET ADDRESS)		NA		
•		NA	····	
Enter new mailing address, if applicable:		NA		7/11/02/
(Muiling address MAY BE A POST OFFICE	BOX)	NA .		7
		NA		S = 1
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our recor	ds, <u>enter the nam</u>	e of the new registered
Name of New Registered Agent:	NA			<u> </u>
New Registered Office Address:	NA		<b></b>	
		Enter Florida si	reei address	
	NA	****	, Florida <u>N</u> A	
		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	MELODY CRUZ GOMEZ	11733 N 14TH STREET	■Add
		TAMPA, FL 33634	□Remove
			□Change
			□Add
	·		□Change
	120000000000000000000000000000000000000		DAdd
			□Remove
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		***************************************	Петоче
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			☐Change
		**************************************	DAdd
			☐Remove .
			Change

From: Yanet Avila

To:

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ieffer	tive 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 0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as
numer	it's effective date on the Department of State's records.
ensed.	empoisor a delevad effective data but not up offentive time as 17.01
s filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the l.
N.	OUTLINTS ASS
ed _	OVEMBER, 4TH 2024
	in es
	Signature of a member or nuthorized representative of a member
	MERLIN I. GOMEZ

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