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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number : 110432003053 Phone : (561)694-8107 Pax Number : (561)214-8442

\*\*Enter the email address for this business entity to be used for future 24 annual report mailings. Enter only one email address please.\*\*

Rmail Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN N & I HOLDINGS INVESTMENTS LLC

Certificate of Status	0
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T. LEMIEUX

MAY 1 0 2023

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N & I HOLDINGS INVESTMENTS LLC		
(Name of the Limited Liability Com (A Florida Limite	ipany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on 03/28/2023	and assigned
Florida document number M23000004004		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lin	ability company here:	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" o	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		28 3
3. If amending the registered agent and/or registered office seent and/or the new registered office address here:	e address on our records, enter th	e name of the new regist
		<del></del>
Name of New Registered Agent:		<u> </u>
New Registered Office Address:	Enter Florida street address	<del></del>
	, Flori , Flori	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>	<u>Name</u>	Address	Type of Action
Managing <u>Member</u>	WILLIAM R. ALVAREZ	270 SW 25th Rd, Apt 1, Miami, FL 33129	<b>\( \int \)</b> Add
			□Remove
			□ Change
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			Петюче
			Change
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•	<del></del>		<del></del>		<del></del>
			<u> </u>		
Effective date, if other than fan effective date is listed, the date Note: If the date inserted in the document's effective date on the	is diock does hot i	meet the applicat	odate of filling or mor ble statutory filing	c than 90 days after firequirements, this o	ial) ling.) Pursuant to 605 0207 date will not be listed as
e record specifies a delayed effe d is filed.	sctive date, but no	t an effective tim	se, at 12:01 a.m. on	the earlier of: (b)	The 90th day after the
Dated May 9th	1/2	, 2023	_•		
11	14, -				

Filing Fee: \$25.00