(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

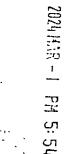
Office Use Only

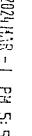




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COVER LETTER

TO: Registration Section **Division of Corporations** Nicole White Real Estate Professionals, LLC SUBJECT: Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: Nicole White Name of Person Firm/Company 15929 SW Indianwood Circle Address Indiantown, FL 34956 City/State and Zip Code nmwhite1201@yahoo.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Nicole White Name of Person Enclosed is a check for the following amount: □ \$60.00 Filing Fee. S30.00 Filing Fee & ☐ \$55.00 Filing Fee & **■** \$25.00 Filing Fee Certificate of Status Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) (additional copy is enclosed) Mailing Address: Street Address: Registration Section Registration Section

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

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

Nicole White Real Estate Professionals, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/01/2023 ___ and assigned Florida document number L23000535102 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Nicole White , LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address _, Florida ___

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 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
			□ Add
			□Remove
			□Add
			□Remove
			□Change
			□Remove
		3444	Change
			□ Add
			□Remove
			□ Change
	·		□Add
			□Remove
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			□Remove
			□Change

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(II an effect Note: I	te date, if other than the date of filing: 12/01/2023 (optional) etive 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 (3) f the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the other of the Department of State's records.
	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
ne record ord is file	
ord is file	d.
ord is file	