

1/12/2017 Jan. 13. 2017 10:15AM

Rossway Swan Tierney Barry, P.L.

No. 9971

L15000177063

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H17000011929 3)))



H17000011929ABC/

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : ROSSWAY SWAN TIERNEY BARRY LACEY & OLIVER, P.L.
Account Number : I20050000159
Phone : (772)231-4440
Fax Number : (772)231-4430

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

Email Address: remmons@rosswayswan.com
and vittorio83@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
1820 50TH AVENUE, LLC

Certificate of Status	1
Certified Copy	1
Page Count	04
Estimated Charge	\$60.00

RECEIVED

2017 JAN 13 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2017 JAN 13 PM 12:26

FILED

Electronic Filing Menu

Corporate Filing Menu

Help

S Warren

JAN 17 2017

Detail by Entity Name

Florida Limited Liability Company
1820 50TH AVENUE, LLC

Filing Information

Document Number	L15000177063
FEI/EIN Number	N/A
Date Filed	10/19/2015
State	FL
Status	ACTIVE
Last Event	REINSTATEMENT
Event Date Filed	01/12/2017

Principal Address

5120 ROSEWOOD LN
VERO BEACH, FL 32966-2242

Mailing Address

5120 ROSEWOOD LN
VERO BEACH, FL 32966-2242

Registered Agent Name & Address

MANGIERI, VICTOR A
5120 ROSEWOOD LN
VERO BEACH, FL 32966-2242

Name Changed: 01/12/2017

Authorized Person(s) Detail

Name & Address

Title MGR

MANGIERI, VICTOR A
5120 ROSEWOOD LN
VERO BEACH, FL 32966-2242

Annual Reports

Report Year	Filed Date
2016	01/12/2017
2017	01/12/2017

Document Images

01/12/2017 - REINSTATEMENT	View image in PDF format
10/19/2015 - Florida Limited Liability	View image in PDF format

Jan. 13. 2017 10:16AM Rossway Swan Tierney Barry, P.L.

No. 9671 P. 4

2017 FLORIDA LIMITED LIABILITY COMPANY REINSTATEMENT

DOCUMENT# L15000177063

Entity Name: 1820 50TH AVENUE, LLC

Current Principal Place of Business:

5120 ROSEWOOD LN
VERO BEACH, FL 32966-2242

Current Mailing Address:

5120 ROSEWOOD LN
VERO BEACH, FL 32966-2242 US

FEI Number: NOT APPLICABLE

Certificate of Status Desired: No

Name and Address of Current Registered Agent:

MANGIERI, VICTOR A
5120 ROSEWOOD LN
VERO BEACH, FL 32966-2242 US

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida

SIGNATURE: VICTOR A. MANGIERI

01/12/2017

Electronic Signature of Registered Agent

Date

Authorized Person(s) Detail :

Title MGR
Name MANGIERI, VICTOR A
Address 5120 ROSEWOOD LN
City-State-Zip: VERO BEACH FL 32966-2242

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am a managing member or manager of the limited liability company or the receiver or trustee empowered to execute this report as required by Chapter 605, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: VICTOR A. MANGIERI

MANAGER

01/12/2017

Electronic Signature of Signing Authorized Person(s) Detail

Date

COVER LETTER

(((H17000011929 3)))

**TO: Registration Section
Division of Corporations**

SUBJECT: 1820 50th Avenue, LLC

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:

Rebecca F. Emmons

Name of Person

Rossway Swan Tierney Barry Lacey & Oliver, P.L.

Firm/Company

2101 Indian River Blvd., Suite 200

Address

Vero Beach, FL 32960

City/State and Zip Code

remmons@rosswayswan.com & vittorio83@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rebecca F. Emmons

772 231-4440
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the 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)

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

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(((H17000011929 3)))

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

1820 50th Avenue, 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 October 19, 2015 and assigned Florida document number L15000177063.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VP Plaza, LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" 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)

FILED
JAN 13 P 2:21
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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 _____
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:

(((H17000011929 3)))

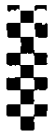
MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Change

FILED
 JUN 13 2017 10:21 AM
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

(((H17000011929 3)))



January 13, 2017

FLORIDA DEPARTMENT OF STATE
Division of Corporations

1820 50TH AVENUE, LLC
5120 ROSEWOOD LN
VERO BEACH, FL 32966-2242US

SUBJECT: 1820 50TH AVENUE, LLC
REF: L15000177063

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

✓ Your entity was administratively dissolved or its certificate of authority was revoked for failure to file the annual report/uniform business report as required by law. To reinstate this entity complete the enclosed application/report form. Reinstated 1-12-17.

✓ The document submitted does not meet legibility requirements for electronic filing. Please do not attempt to refax this document until the quality has been improved.

Can not read the document number, new name or address.

Clear Copy attached. No change in address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly
Regulatory Specialist II

FAX Aud. #: R17000011929
Letter Number: 317A00000814

RECEIVED

2017 JAN 13 AM 10:26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

P.O BOX 6327 - Tallahassee, Florida 32314