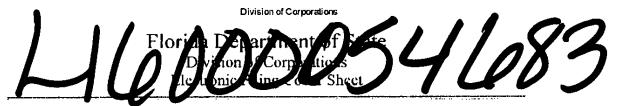
6/13/2016



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : LEGALZOOM.COM INC.

Account Number: I20010000062 Phone

: (323)962-8600

Fax Number

: (323)962-3889

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

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VILLARA ENTERPRISE, LLC

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TO:

Registration Section

Division of Cor	porations		
VILLARA SUBJECT:	ENTERPRISE, LLC		
	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspo	ndence concerning this matter t	to the following:	
	Cheyenne Moseley		
	<u></u>	Name of Person	
	Legalzoom.com, Inc.		
		Firm/Company	
	101 N. Brand Blvd., 11th	1 Floor	
•		Address	
	Glendale, CA 91203		1 m.3
		City/State and Zip Code	TALL
	fldwinkler65@outlook.co	m	
	E-mail address: (6	o be used for future armual report notification)	52× T ·
For further information c	oncerning this matter, please ca	D:	Sec. 22
Imelda Vasquez		800 773-0888 ext. 9724	
Name o	Person	Area Code Daytime Telepho	
			型のロ
Enclosed is a check for th	e following amount:		7.
□ \$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 Tallabassee, FL 32301

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Cons		
(A Florida Limite	noany as is now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number <u>L16000054683</u>	ny were filed on 03/17/2016 and assign	ıed
This amendment is submitted to amend the following:	•	
A. If amending name, enter the new name of the limited lis	ability company here:	
The new name must be distinguishable and end with the words "Limited Li	ishility Company," the designation "LLC" or the abbreviation "L.L.	<u>c."</u>
Enter new principal offices address, if applicable:	2395 Caraway Drive	
(Principal office address MUST BE A STREET ADDRESS)	Venice, FL 34292	
Enter new mailing address, if applicable:	2395 Caraway Drive	· -
(Malling address MAY BE A POST OFFICE BOX)	Venice, FL 34292	
Name of New Registered Agent:		Addition than the Addition and the
Name of New Registered Agent: New Registered Office Address:	Exten Elasida etrest address	
	Enter Florido street address	
	Enter Florida street address, Florida Cloy Zip Code	
	, Florida	
New Registered Office Address:	Chy Zip Code at: gree to act in this capacity. I further agree to comply the performance of my duties, and I am familiar with a s provided for in Chapter 605, F.S. Or, if this docume ce address, I hereby confirm that the limited liability	ınd
New Registered Office Address: New Registered Agent's Signature, if changing Registered Agent I hereby accept the appointment as registered agent and as provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	Clty Zip Code at: gree to act in this capacity. I further agree to comply the performance of my duties, and I am familiar with a s provided for in Chapter 605, F.S. Or, if this docume the address, I hereby confirm that the limited liability	ınd

Authorized	Member being added or removed fr	oer on our records, <u>enter the title, r</u> om our records:	name, and address of each Manager or
MGR = M AMBR = A	innager Authorized Member		
Title	Name	Address	Type of Action
			C Add
			☐ Remove
		·	
			□ Add
			Remove

			C Remove
			C Remove
			- O Add
			O Remove
			O Add O O Remove

Page 2 of 3

Article IV. Please update addresses for AMBRs Joseph Villara and Deborah Villar 2395 Caraway Drive, Venice, FL 34292	
late, if other than the date of filing: date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after document is filed by the Florida Department of State)	
(0/7/2016	
Dehorah Villara	
Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00

