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(Requestor's Name)				
(Address)				
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(City/State/Zip/Phone #)				
PICK-UP WAIT MAIL				
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(Document Number)				
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

BL VORISEK MULL OCT 20 2018

COVER LETTER

TO:	Registration Se Division of Cor					
	VVMB RE	LLC				
SUBJECT:Name of Limited Liability Company						
The en	iclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please	return all correspo	ndence concerning this matter	to the following:			
		CELSO MORAES				
		ASSELFIS INTERNATIO	Name of Person NAL LLC			
	Firm/Company 7901 KINGSPOINTE PARKWAY SUITE 10					
		ORLANDO FL 32819	Address			
		CELSO@ASSELFIS.COM	City/State and Zip Code	 		
			to be used for future annual repor	t notification)		
		oncerning this matter, please co				
CELS	O MORAES		407 826-10. at () Area Code Da			
	Name o	f Person	Area Code Da	aytime Telephone Number		
Enclos	sed is a check for th	ne following amount:				
□ \$ 2	5.00 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)		
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 ussee, FL 32314	Registration S Division of Co Clifton Buildi	orporations		

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Lim	ited Liability Compa (A Florida Limited)	any as it now appear Liability Company)	s on our records.)	
The Articles of Organization for this Limited I Florida document number	Liability Company	were filed on 6	02/2017 and assigned	
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liab	oility company he	<u>re</u> :	
The new name must be distinguishable and contain the		lity Company," the d	esignation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable: 350 LINCOLN ROAD - SUITE 2022				
(Principal office address MUST BE A STRE	<u>ET ADDRESS)</u>	MIAMI FL. 33139		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u>: BOX)</u>		ROAD - SUITE 2022	
-		MIAMI FL. 33139		
B. If amending the registered agent and registered agent and/or the new registered of Name of New Registered Agent:	office address her			
New Registered Office Address:	7901 KINGSP	OINTE PARKWAY	' - SUITE 10	
New Registered Office Address.		Enter Flor	ida street address	
	ORLANDO		, Florida	
		City	Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

VVMB RE LLC

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

Page 1 of 3

If amending Authorized Person(s) authorized to manage, <u>enter the title</u>, <u>name</u>, <u>and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	LUIS FELIPE NEIVA SILVEIRA	10203 COLLINS AVE UNIT 1902N	Add
		BAL HARBOUR, FL 33154-1858	Add
			☐ Remove
			□ Change
			☐ Remove
		· ·	Change
			
			□ Remove
			□ Change
			□ Remove
			Change
			Add
			Remove
			Change
			Add
		·*···	☐ Remove
			□ Change

). If amending any of	ner information, enter change(s	s) here: (Attach additional sheets, if neces	sary.)
			=
			
 			
			-
 			
		·	
Note: If the date inse	her than the date of filing: ed, the date must be specific and cannot be erted in this block does not meet the date on the Department of State's re	coption to date of filing or more than 90 days after framplicable statutory filing requirements, this excords.	nal) iling) Pursuant to 605.0207 (3) date will not be listed as the
	es a delayed effective date, b fter the record is filed.	out not an effective time, at 12:01 a.	m. on the earlier of:
09/24/2018 Dated			
	Signature of winember c	or distinctized representative of a member	
STANDA	RD NOMINEES LIMITED		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00