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JUN 29 2020



AUG 1 2 2020 S. YOUNG

COVER LETTER

Division of Cor		·		
•	ESTIGATIONS & PROTEC	TION SERVICES LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	URGELLES, YANS A			
	Name of Person			
	VIPER INVESTIGATION	IS & PROTECTION SERVICES	LLC	
	Firm/Company			
	2831 BUCKLEY AVE			
		Address		
	LAKE WORTH, FL 3346	1		
		City/State and Zip Code	***	
	viperips.2020@gmail.com		<u></u>	
	E-mail address: (to be used for future annual report not	fication)	
For further information c	oncerning this matter, please ca	all:		
YANS A URGELLES		561 714-2680		
Name of Person		at () Area Code Daytim	e Telephone Number	
Enclosed is a check for th	ne 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:		Street Address:		
Registration Section		Registration Section Division of Corporations		
Division of Corporations P.O. Box 6327			The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIPER INVESTIGATIONS & PROTECTION SERVICES 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 03/04/2020 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L. 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 agent and/or the new registered office address here: JUAN CARLOS DOMINGUEZ HERNANDEZ Name of New Registered Agent: 2831 BUCKLEY AVE New Registered Office Address: Enter Florida street address LAKE WORTH City

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 comprovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this doct 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 Agen

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of
MGR	JUAN CARLOS DOMINGUEZ	2831 BUCKLEY AVE	EPAda
		LAKE WORTH, FL. 33461	□Rer
			□Cha
MGR YANS A URGELLES	YANS A URGELLES	2831 BUCKLEY AVE	 Add
		LAKE WORTH, FL 33461	□Rer
			□ Ad-
			\Ad-
			□ Chi
			□Ad
			□Re
			□Ch.
			□Re:
			□Ch

	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
,	
-	
(If an effect Note: If	ob/23/2020 date, if other than the date of filing: ive 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 6 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be lit's effective date on the Department of State's records.
the record s cord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at
Dated	06/24/2020.
	Signature of a member or authorized representative of a member
	Tans A. Urae les Typedor printed name of signee

Filing Fee: \$25.00