

7/19/2021

Division of Corporations

L200000322023
Florida Department of State
Division of Corporations
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To: Division of Corporations
Fax Number : (850)617-6383

From: Account Name : BLACKLEDGER ENTITY MANAGEMENT LLC
Account Number : I2015000089
Phone : (305)444-8800
Fax Number : (305)444-4010

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VILLACON USA, LLC

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Corporate Filing Menu

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BB
7/20/21

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VILLACON USA, 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 10/12/2020 and assigned Florida document number L20000322023

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.L.C."

Enter new principal offices address, if applicable:

2330 Ponce de Leon Blvd.,

(Principal office address MUST BE A STREET ADDRESS)

Coral Gables, FL 33134

Enter new mailing address, if applicable:

2330 Ponce de Leon Blvd.,

(Mailing address MAY BE A POST OFFICE BOX)

Coral Gables, FL 33134

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:

Worldwide Corporate Administrators LLC

New Registered Office Address:

2330 Ponce de Leon Blvd.,

Enter Florida street address

Coral Gables

Florida 33134

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

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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>	<u>Address</u>	<u>Type of Action</u>
Owner	Villalvazo Baz, Jose Manuel	2330 PONCE DE LEON BLVD	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGRM	Villalvazo Pelaez, Jose Manuel	2330 PONCE DE LEON BLVD	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGRM	Villalvazo, Pelaez, Lorena Guacabaja	2330 PONCE DE LEON BLVD	<input type="checkbox"/> Add
		CORAL GABLES, FL 33134	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

