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To:

Division of Corporations

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: (850)617-6383

From:

Account Name : CLARA GIRALDO ENROLLED AGENT

Account Number : I19990000017 Phone : (305)485-9300

Fax Number

: (305)485-1098

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 VP PURA VIDA USA, LLC.

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VP PURA VIDA USA, LLC.			
(Name of the Li	mited Liability C (A Florida Lir	Company as it now appears on our records.) mited Liability Company)	
The Articles of Organization for this Limited	Liability Com	pany were filed on 08/25/2021	and assigned
Florida document number L21000381560			
This amendment is submitted to amend the fo	ollowing:		
A. If amending name, enter the new name	of the limited	liability company here:	
N/A			
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 appl	licable:	<u>N/A</u>	
(Principal office address MUST BE A STRE	ET ADDRES.	S)	
			·
Enter new mailing address, if applicable:		N/A	
Mailing address MAY BE A POST OFFICE	E BOX)		
If amounting the registered agent 1/		N	
 If amending the registered agent and/or agent and/or the new registered office addr 	registerea on ess here:	nce address on our records, enter the nai	ne of the new regist
			20
Name of New Registered Agent:	N/A		22 A
New Registered Office Address:			ELLS
		Enter Florida street address	7 0 F3
		, Florida	五次 3 00
		City	2 Zp C 200
ew Registered Agent's Signature, if changing	Registered Age	ent:	· ·

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 amending 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>	Name	Address	Type of Action
MGR	ALESSANDRO DE MARZO	7939 NW 21 ST	= Add
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