Division of Corporations

Florida Department of State

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Division of Corporations

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From:

Account Name : COMPUTERSHARE Account Number : 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN SENZA VAT UNIVERSE LLC

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AUG 0 2 2023

K. Brumbiey

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SENZA VAT UNIVERSE LLC				
(Name of the Limited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)		_	
The Articles of Organization for this Limited Liability Company Florida document number L22000476870	were filed on 11/07/2022	and	assign	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company here:			
VATT Universe 2 LLC				
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	bbreviation	"L.L.C.	
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 agent and/or the new registered office address here:	address on our records, enter the nan	ne of the I	<u>new re</u>	gistered
		<u></u> 5-8-3	207	
Name of New Registered Agent:			<u>₩</u>	
New Registered Office Address:		<u> </u>	AUG	<u> </u>
	Enter Florida street address	77 - 1 27 - 1	Ż	
***	, Florida		골	<u> </u>
	Cín;	— Zip Co. □	ڣ	_
New Registered Agent's Signature, if changing Registered Agent:		a: 		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as a being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or	familiar : , if this do	with a	nd

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	Venessa Garcia	8012 WILES RD	
		CORAL SPRINGS, FL 33067	□Remove
			Change
MGR	ANTONIO SENZATELA	8012 WILES RD	
		CORAL SPRINGS, FL 33067	=Remove
			Change
			□Add
			Remove
		□Change	
			
			Remove
			□Change
			□Add
			Remove
			Change
			□Add
			□ Remove
			□Change

						
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ective date, if other than the effective date is listed, the date mus	date of fili	ng:	se to data of filin	u or more than Of	(optional)	Puesuant to AOS 026
<u>te:</u> If the date inserted in this bl	ock does not	meet the appli	icable statutor;	y filing requirer	nents, this date v	vill not be listed a
nument's effective date on the De	epartment of	State's record	8.			
cord specifies a delayed effective	a data hut n	ot an offactiva	tima at 12:01	a m. on the ear	lier of: th) The	Outh day after the
s filed.	e date, out in	or an encente	inic, ac 12.01	a.m. on the car	ner or (o) The	your day arrer un
		4.14.				
August 2nd		2023	·			
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		NANU	y Perku	ns		

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