## W400009777

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA



## **COVER LETTER**

TO:

**Registration Section** 

Division of Co	rporations		
SUBJECT: VH INVE	STMENT GROUP, LLC	C	
SUBJECT: VITALE		nited Liability Company)	
The enclosed Articles of	Amendment and fee(s) are sul	bmitted for filing.	
Please return all correspo	ondence concerning this matter	r to the following:	
	EDWARD VIECO		
		(Name of Person)	<del></del>
	VH INVESTMENT G	GROUP, LLC.	
	Ţ.		
	07 DEC		
	2500 NW 79 AVENU	(Address)	HASA C 2
	DODAL FLODIDA	20400	SET -
	DORAL, FLORIDA	33122 (City/State and Zip Code)	AMII: L
	•	• ,	SRI D
For further information of	concerning this matter, please	eall:	ν. L. OA
EDWARD VIECO		at (786 ) 331-8119	
(Name	of Person)	(Area Code & Daytime T	elephone Number)
Enclosed is a check for t	he following amount:		
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Sectificate of Status & Certified Copy (additional copy is enclosed)
Regist Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VH INVESTMENT GROUP					
(Name of the Limited (A	Liability Comr Florida Limited	pany as it now appears on I Liability Company)	our records.)		
The Articles of Organization for this Limited Li	ability Compar	ny were filed on <u>09/24/</u> 2	2004	_ and assign	ned
Florida document number <u>L0400069777</u>					
This amendment is submitted to amend the follo	owing:		TALLAHASSE	07 DEC 2	Ti
A. If amending name, enter the new name of	the limited lia	ability company here:	S	<u> </u>	
VH TRADING GROUP, LLC.		•	7. S	<b>A</b>	
The new name must be distinguishable and end wit "L.L.C."	h the words "Lii	mited Liability Company,"	the designation	or the abl	reviatio
B. If amending the registered agent and/oregistered agent and/or the new registered of			records, enter the	name of	the nev
Name of New Registered Agent:	N/A				
New Registered Office Address:	N/A				
The residence of the residence.		(Enter	Florida street addre	ss)	
	N/A		. Florida		
		(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 608, 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)

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

D. If amending any other informa				Add
D. If amending any other informs				Remove
D. If amending any other informs				Add Remove
D. If amending any other informs			_ 	Add Remove
D. If amending any other informs				Add Remove
D. If amending any other informs	· 		_ 	Add Remove
D. If amending any other information of the control				Add Remove
	ion, enter change(	s) here: (Attach additional sheets, if necessary.)	( <u>,</u> ⊃	
		E, FLORIDA	AM II: 44	#
Dated DECEMBER 18	, 2007			
EDWARD VIECO	nature of a member of	r authorized representative of a member		•

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Filing Fee: \$25.00