L05000079472

(Requestor's Name)		
(Address)		
(Ac	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Business Entity Name)		
(Document Number)		
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TALLAHASSEE FLORIDA

APR 2 1 2013

T. HAMPTON

COVER LETTER

TO: Registration Se Division of Co		•	42
SUBJECT: "Viac	ities, LLC." Na	ame Change	
<u> </u>	Name of Lim	ited Liability Company	<u>.</u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Tim Derat	anv	
	<u> </u>	Name of Person	
	TD Enterpris	ses, LLC.	
		Firm/Company	.
	13172 SW	/ 50 St	
		Address	
	Miramar,	FL 33027	
	*	City/State and Zip Code	-
	tderatany@gr	nall.com to be used for future annual re	port notification)
For further information of	oncerning this matter, please c		•
Tim Dera	tany	_a ,954,5{	54-4637
Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is a check for t	ne following amount:		
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status &

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Certified Copy (additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)



April 3, 2014

TIM DERATANY 13172 SW 50 ST MIRAMAR, FL 33027

SUBJECT: VIACITIES LLC Ref. Number: L05000079477

We have received your document for VIACITIES LLC and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all the appropriate places. One or more words may be added to make the name distinguishable from the one presently on file. A search for name availability can be made on the Internet through the Division's records at www.sunbiz.org.

Please note the name of a limited liability company must contain the words "Limited Liability Company," the abbreviation "L.L.C.", or the designation "LLC". The following suffixes are no longer acceptable: "Limited Company," "L.C.," "LC.," "LC.," and "Co."

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Tammy Hampton Regulatory Specialist III

Letter Number: 414A00007154

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Viacities, LLC.		 ~~
(<u>Name of the Limited Liability Compa</u> (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L05000079477</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability		HAPRIN 8 AMII: 18
Deratany Enterprises, LLC. The new name must be distinguishable and end with the words "Limited Liab	ility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	Deratany Enterprises, LLC 13172 SW 50 St Miramar, FL 33027	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Deratany Enterprises, LLC 13172 SW 50 St. Miramar, FL 33027).
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. 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 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

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

AMBR = A	authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			☐ Remove
			□ Add
			Remove
			□ Add
		<u></u>	Remove
			Add
		······	Remove
			2014 APR L8 -SECRETARY TALLIAHASSES
			Remove O
			Add
			□ Remove

. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
<u> </u>	
	-
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed of the date this document is filed by the Florida Department of State)	(optional) date and cannot be more than 90 days after
Dated April 11 2014	
TI Louis	
Signature of a member or Authorize	d representative of a member
Timothy Allen Deratany	
Typed or printed no	ime of signee

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Filing Fee: \$25.00

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