# L0500092044

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- 21

# **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: VIBRANT CUSTOMER SERVICES, LLC (Name of Limited Liability Company)
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
MICUEL S. DUNKLEY (Name of Person)
(Firm/Company)
6445 SOUTH MARLE AVE # 202
TEMPE, AZ 85283 (City/State and Zip Code)
For further information concerning this matter, please call:
MICUEL DUNKLEY at (480) 338 - 2-6/0 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee  Certificate of Status  Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
MAILING ADDRESS. STREET/COURIED ADDRESS.

Registration Section **Division of Corporations** 

P.O. Box 6327 Tallahassee, FL 32314

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

08 APR 28 AHII: 43
SECRETARY OF STATE
TALLAHASSEE FLORIDA

(Zip Code)

VIBRANT CU	STOMER	SERVICES,	LLC
( <u>Name of the Limited L</u> (A F	iability Company as it n Torida Limited Liability (	ow appears on our records.) Company)	
The Articles of Organization for this Limited Lia Florida document number <u>LOS 000</u> 0	bility Company were file		os and assigned
This amendment is submitted to amend the follow	ving:		
A. If amending name, enter the new name of to	$\subset$		
The new name must be distinguishable and end with "L.L.C."	the words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation
B. If amending the registered agent and/or registered agent and/or the new registered offi		lress on our records, <u>enter</u>	the name of the new
Name of New Registered Agent:			
New Registered Office Address:		(Enter Florida street a	ddress)
		371	

## 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.

(City)

(If Changing Registered Agent, Signature of New Registered Agent)

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

MGR = Ma MGRM = 1	anager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add
			Remove
			Add Remove
	,		Add Remove
			<del></del>
			Add Remove
		<u> </u>	Add
			Remove
			Add Remove
D. If amen	ding any other informa	tion, enter change(s) here: (Attach additional sheets,	if necessary.)
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_ Dated <u> </u>	123		AMII: 43
	Mier	uf Sunkley	
	MIGUEL	nature of a member or authorized representative of a member of a m	er

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Filing Fee: \$25.00