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COVER LETTER

TO:

Tallahassee, FL 32314

	gistration Sevision of Cor				
CHD ITAT.		TO HOLDINGS, LLC			
SUBJECT:	Name of Limited Liability Company				
The enclose	d Articles of .	Amendment and fee(s) are sub	mitted for filing.		
		ndence concerning this matter	_		
		VIRGILIA M. CORCES			
			Name of Person		
			Firm/Company		
		8900 SW 117 AVENUE, S	UITE B-104		
			Address		
		MIAMI, FLORIDA 33186			
			City/State and Zip Code	· · · · · ·	
		E-mail address: (to be used for future annual report no	otification)	
For further i	information e	oncerning this matter, please ca	all:		
ALEXAND	ER ALVARI	EZ, ESQ.	305 598.2000		
	Name o	f Person	at () Area Code Dayti	me Telephone Number	
Enclosed is	a check for th	ne following amount:			
\$25.00	Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ailing Addres		Street Address:	12 . 	
Registration Section Division of Corporations		Registration S Division of Co			
	O. Box 632		The Centre of		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

HOT POTATO HOLDINGS, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on 12/14/2005 Florida document number L05000118650 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

Title	<u>Name</u>	Address	Type of Action
MGR CORCES. V	CORCES, VIRGILIA M.	8900 SW 117 AVE	□Add
		SUITE B 104	■ Remove
		MIAMI, FL 33186	□ Change
MGR VAS INVESTMENTS LLC	VAS INVESTMENTS LLC	8900 SW 117TH AVE	
		B 104	□Remove
		MIAMI, FL 33186	□Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			🗀 Remove
			□Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
an ef lote:	tive date, if other than the date of filing:
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ated	July 15 Zo20 Signature of a number or authorized representative of a member
	Signature of a member or authorized representative of a member Vingilia M. Onces Typed or printed name of signee
	1/1 1/2 // // // // // // // // // // // // /

Filing Fee: \$25.00