L06000027238

(Requestor's Name)
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COVER LETTER

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eno tez	LAW OFF	ICE OF VICTORIA VIDRE P	LC		
SUBJEC	-1:	Name of Lim	Name of Limited Liability Company and fee(s) are submitted for filling. seeming this matter to the following: RANCE ACCOUNTING SYSTEMS INC Firm/Company INES BLVD STE 222 Address OKE PINES, FL 33029 City/State and Zip Code tol.com E-mail address: (to be used for future annual report notification) its matter, please call:		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		GUILLERMO DE HOWA	RTZ		
			Name of Person		
		IN BALANCE ACCOUN	TING SYSTEMS INC		
			Firm/Company		
		18459 PINES BLVD STE	222		
			Address		
		PEMBROKE PINES, FL.	33029		
	City/State and Zip Code				
		gdh1d@aol.com		(Cartina)	
E 6 4			•	reations	
ror turtn	ier information c	concerning this matter, picase c	nii.		
GUILLI	ERMO DE HOW	VARTZ	at ()		
	Name o	of Person	Area Code Daytime	e Telephone Number	
Enclosed	l is a check for the	he following amount:			
■ \$25.	00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy	Certificate of Status & Certified Copy	
	Mailing Addres			ation	
	Registration ! Division of C		Division of Cor		
		*	m		

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

LAW OFFICE OF VICTORIA VIDRE LLC

²⁰²² APR -8 PM 4: 26

(Name of the Limited Liability Company as it now appears on our records RETARY OF STATE The Articles of Organization for this Limited Liability Company were filed on $\frac{03/15/2006}{1}$ and assigned Florida document number L06000027238 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: LAW OFFICE OF VICTORIA VIDRE PLLC 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

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 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
			□Remove
			Change
			DAdd
			□Remove
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ective date, if other than the on effective date is listed, the date must te: If the date inserted in this blocument's effective date on the De	be specific and cannot be prio ck does not meet the appli	cable statutory filing	re than 90 days a	ptional) fler filing.) Pursuant to 60; this date will not be list	5.020' ted a:
ecord specifies a delayed effective s filed.	date, but not an effective	time, at 12:01 a.m. or	n the earlier of	: (b) The 90th day afte	er the
MARCH 9.	2022	<i>-</i>			
1/2					
	signature of a member or auth	norized representative o	f a member		
VICTORIA VIDRE					
	Typed or prin	ted name of signee		_ _ _	

Filing Fee: \$25.00



RECEIVED

2022 APR -8 AM 7:54

FLORIDA DEPARTMENT OF STATE Division of Corporations

SECRETALITY STATE TALLAHASSEE.FL

March 28, 2022

GUILLERMO DE HOWARTZ 18459 PINES BLVD STE 222 PEMBROKE PINES, FL 33029

SUBJECT: LAW OFFICE OF VICTORIA VIDRE LLC

Ref. Number: L06000027238

We have received your document for LAW OFFICE OF VICTORIA VIDRE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

YOU NEED TO BE SPECIFIC IN THE NATURE OR YOUR BUSINESS

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) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 622A00007225

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