

LOB0000692140

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

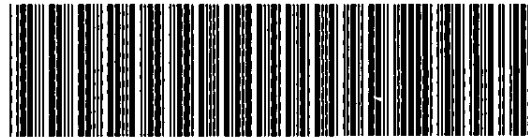
Special Instructions to Filing Officer:

A. LUNT

DEC 28 2011

EXAMINER

Office Use Only



000215465510

000215465510
12/27/11--01038--014 **60.00

FILED
2011 DEC 27 PM 4:49
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: VASH SOLUTIONS, 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:

Vincent Adams

Name of Person

Firm/Company

3201 NW 35th Way

Address

Fort Lauderdale, FL 33309

City/State and Zip Code

vadam@bellsouth.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vincent Adams

Name of Person

at (954)

605-2246

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- ☐ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☒ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

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

STREET/COURIER ADDRESS:

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

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2011 DEC 27 PM 4:49

FILED

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VASH SOLUTIONS, 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 9/19/2006 and assigned
Florida document number L06000092140.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GOOD PIRATES SOLUTIONS, LLC

The new name must be distinguishable and end with the words "Limited Liability 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)

757 SE 17th Street

Suite 895

Fort Lauderdale, Florida 33316

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

757 SE 17th Street

Suite 895

Fort Lauderdale, Florida 33316

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:

InCorp Services, Inc.

New Registered Office Address:

17888 67th Court North

Enter Florida street address

Loxahatchee

Florida

33470

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

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Vincent Adams	757 SE 17th Street Suite 895 Fort Lauderdale, Florida 33316	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Vincent Adams	3201 NW 35th Way Fort Lauderdale, Florida 33309	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGM	Delicia M. West	757 SE 17th Street Suite 895 Fort Lauderdale, Florida 33316	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGM	Ellie W. Adams Jr.	757 SE 17th Street Suite 895 Fort Lauderdale, Florida 33316	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGM	Ellie W. Adams Jr.	3430 Aubrun Street Fort Lauderdale, Florida 33312	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated December 20, 2011



Signature of a member or authorized representative of a member

Vincent Adams

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
DEC 27 PM 4:49

FILED