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COVER LETTER

	gistration Sec vision of Corp		
cun irot.		MARTINEZ REALTY LLC	
SUBJECT:		Name of Limited Liability Company	
The enclose	d Articles of	Amendment and fee(s) are submitted for filing.	
Please return	n all correspo	ondence concerning this matter to the following:	
		Yvonne Menendez	
		Name of Person	
		Your Legal Outsource, LLC	
		Firm/Company	
		3530 SW 22nd Street, Unit 610	
		Address	
		Miami, Florida 33145	
		City/State and Zip Code	
		ym@yourlegaloutsource.com E-mail address: (to be used for future annual report notification)	
For further i	information co	concerning this matter, please call:	
Yvonne Mc	enendez	787 692-5494 at ()	
	Name of	at () f Person Area Code Daytime Telephone Number	_
Enclosed is	a check for th	he following amount:	
□ \$ 25.00	Filing Fee	☐ \$30.00 Filing Fee & ☐ \$55.00 Filing Fee & ☐ \$60.00 Filing Certificate of Status	Status &

TO:

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

Street Address: 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

IGNACIO MARTINEZ REALTY 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 February 18, 2008 ____ and assigned Florida document number 1.0800017158 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: VIM Realty Group LLC The new name must be distinguishable and contain 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) 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, <u>enter the title, name, and address of each person</u> <u>being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□ Remove
			□Change
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n effective date is liste ote: If the date inse	er than the date of filid the date must be specific at ted in this block does not late on the Department of	nd cannot be prior to meet the applicab	date of filing or more	(optiona than 90 days after filin quirements, this da	g.) Pursuant to 605.0207
ecord specifies a de is filed.	ayed effective date, but n	ot an effective time	e, at 12:01 a.m. on t	he earlier of: (b)	The 90th day after the
September 3,	Men	2024	. -		
.	Signature of	a member or authori	zed representative of a	member	
Yvonne M	enendez (Attorney)				
		Typed or printed			