109000103073

(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:

Office Use Only



200303572612

09/19/17--01013--010 **50.00

17 SEP 1-5 AH 8: 49

SEP 2 0 2017 Y SULKER

COVER LETTER

TO:	Registration Se Division of Cor							
CHD IC		& Associates, LLC						
SUBJECT:								
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.					
Please re	eturn all correspo	ndence concerning this matter	to the following:					
		Tomeka Napper						
			Name of Person					
		ViJIEN Enterprises Corpo	ration					
	Firm/Company							
		100 Commodore Drive, #5	526					
		Address						
		Plantation, FL 33325						
								
		management@vijienenterpr						
For furth	ner information co	oncerning this matter, please c	to be used for future annual report notificall:	cation)				
Tomeka	Napper		754 800-5372					
	Name of	Person		Telephone Number				
Enclosed	d is a check for th	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

R. Cabrera & Associates, 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 $\frac{10/26/2009}{10}$ and assigned Florida document number L09000103073 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 "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 , Florida ____ City

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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
Exe. Asst	Melanic Rojas	13762 W. State Road 84	■ Add
		Suite 274	☐ Remove
		Davie, FL 33325	□ Change
Secretary	Naomi Rojas	13762 W. State Road 84	■ Add
		Suite 274	☐ Remove
		Davie, FL 33325	☐ Change
			Add
			Remove
			☐ Change
			□ Add
			Remove
			Change
			F. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6. 6.
		1977.4	□ Remove
			Change
			Add
			□ Remove
			☐ Change

•					
				21 -	7
				;	Ø
				E)	713 717
	· · · · · · · · · · · · · · · · · · ·				G h
				iu c	7.
				FLO V	œ
ctive date, if other than the date of filing effective date is listed, the date must be specific and	ennot ha prior to d	ata of filing or mor		al) na) Punuant	•= 405 0°
e: If the date inserted in this block does not me	eet the applicable				
ument's effective date on the Department of St	ate's records.				
record specifies a delayed effective da he 90th day after the record is filed.	ate, but not a	n effective tin	ne, at 12:01 a.n	n. on the	earlier
ne soul day after the record is filed.					
August 21	2017				
ed,					
		/			

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00