

**LOG000117275**

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DIVISION OF CORPORATIONS  
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From:

To:

Division of Corporations  
Fax Number : (850)617-6383Account Name : PADRON AND ASSOCIATES INC.  
Account Number : I20060000156  
Phone : (305)818-0404  
Fax Number : (305)818-0898

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
VGD ENTERPRISES, LLC

Certificate of Status	0
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Estimated Charge	\$25.00

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OCT 16 A 9 24  
TALLAHASSEE, FLORIDA  
SECRETARY OF STATE

B. BOSTICK

OCT 17 2014

EXAMINER



## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VG D ENTERPRISES 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:

EDUARDO DIEPPA III  
Name of Person  
DIEPPA LAW FIRM P.A.  
Firm/Company  
2097 W 76 ST  
Address  
FT LAUDERDALE FL 33016  
City/State and Zip Code  
EDIEPPA @ DIEPPA LAW. COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

EDUARDO E DIEPPA III at (305) 826-8266  
Name of Person 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

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TALLAHASSEE, FLORIDA

2014 OCT 16 A 9:24

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

VG D ENTERPRISES 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 12/9/2009 and assigned Florida document number L 09000117275

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 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)

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 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 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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AMBR	GABRIEL E. EGUES	10841 NW 80 Ct	<input checked="" type="checkbox"/> Add
		Miami Lakes, FL, 33010	<input type="checkbox"/> Remove

AMBR	DANIEL A. EGUES	10841 NW 80 Ct	<input checked="" type="checkbox"/> Add
		Miami Lakes, FL, 33010	<input type="checkbox"/> Remove

☐ Add

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

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated OCT. 16, 2014

Valerie Marie Egner

Signature of a member or authorized representative of a member

Valerie Marie Egner

Typed or printed name of signer

Page 3 of 3  
Filing Fee: \$25.00

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