LIC 000332346

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02/15/21--01016--029 **29.00

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COVER LETTER

TO: Registration S Division of Co			
	NVESTMENTS, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	ļ
Please return all correspondence	ondence concerning this matter	to the following:	
	VINCENT ROSSI		
		Name of Person	· · ·
	VIESTE INVESTMENTS	, LLC	I
		Firm/Company	
	27499 RIVERVIEW CEN	TER BLVD	,
	-	Address	
	BONITA SPRINGS, FL 3	4134	
		City/State and Zip Code	
	VINNIE@SEACASTLEDI	EVELOPMENT.COM to be used for future annual report not	ification)
For further information of	concerning this matter, please c	·	
VINCENT ROSSI		401 265-2700	i
	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he 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 Addre Registration Division of C P.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Col The Centre of Toll 2415 N. Monro Tallahassee, FI	rporations Fallahassee oe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIESTE INVESTMENTS, 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 Lia	ability Company	were filed on $\frac{03/23/20}{}$	10	and assigned
Florida document number L10000032346				'
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited liab	ility company here:		1
The new name must be distinguishable and contain the wo	ords "Limited Liabil	lity Company," the designati	on "LLC" or the abb	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		27499 RIVERVIEW C	ENTER BLVD	
		BONITA SPRINGS, FL 34134		
				
Enter new mailing address, if applicable:		27499 RIVERVIEW C	ENTER BLVD	I
(Mailing address MAY BE A POST OFFICE BOX)		BONITA SPRINGS, F	L 34134	
				<u> </u>
B. If amending the registered agent and/or reagent and/or the new registered office address Name of New Registered Agent:	gistered office a	ddress on our records	, enter the name	of the new registered
New Registered Office Address:	27499 RIVERV	TEW CENTER BLVD		<u> </u>
	Enter Florida street addres		rt address	丰 :
	BONITA SPRINGS City		Florida	Zip Code
New Registered Agent's Signature, if changing Re	egistered Agent:	Cirj		Zip Code
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has	agent and agre r and complete ered agent as p gistered office hange.	performance of my du provided for in Chapte. address, I hereby conj	ties, and I am fa r 605, F.S. Or, ij Irm that the limi	miliar with and f this document is ited liability
	If Chan	ging Registered Agent, <u>Sig</u> i	nature of New Regis	stered 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

Title	<u>Name</u>	<u>Address</u>	Type of Action
MBR PAMI	PAMELA ROSSI	27499 RIVERVIEW CENTER BLVD	≣ Aḍd
		BONITA SPRINGS, FL 34134	□ Remove
			□Change
			🗀 Aḍd
		□ Remove	
			□Change
			□Add
			□ Remove
			□Change
			□Add
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		□Add 	
			□Remove
			□Change
			□Add
			□Remove
			□ Change

If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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lf an eff <u>Note:</u>	ive date, if other than the date of filing:
e record	d specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the ed.
Dated .	2/11/21
	Signature of a member or authorized representative of a member
	VINCENT ROSSI
	Typed or printed name of signee

Filing Fee: \$25.00