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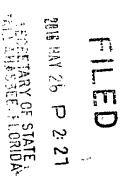
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COVER LETTER

Дiv	ision of Corp	porations		
SUBJECT:	VIM INVES	STMENTS LLC		
освойст.			ited Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		GISELA SANCHEZ-MED	DINA	
			Name of Person	
		GISELA SANCHEZ-MED	DINA PA	
			Firm/Company	
		14665 SW 132 CT		
			Address	
		MIAMI, FL 33186		
		***************************************	City/State and Zip Code	
		GISELASANCHEZMEDIN	-	
	ı	E-mail address: (to be used for future annual report notifi	cation)
For further in	nformation co	oncerning this matter, please ca	all:	
GISELA SA	NCHEZ-ME	DINA	305 9034760 at ()	
	Name of	Person		Telephone Number
Enclosed is a	a check for the	e following amount:		
₩ \$25.00 F	iling 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)

Registration Section

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

(Name of the Limited Liability Comp	oany as it now appears on our records. I Liability Company))
(A Fiorida Limited	Liability Company)	
The Articles of Organization for this Limited Liability Compan	y were filed on	and assigned
Florida document number L-11000099469		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	A PAR PAR PAR PAR PAR PAR PAR PAR
The new name must be distinguishable and contain the words "Limited Lial	5 (()
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		- S - S - S - S - S - S - S - S - S - S
		27 27
	, , , , , , , , , , , , , , , , , , ,	•
Enter new mailing address, if applicable:	14665 SW 132 CT	· · · · · · · · · · · · · · · · · · ·
(Mailing address MAY BE A POST OFFICE BOX)	MIAMI, FL 33186	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		enter the name of the
registered agent and/or the new registered office address no	<u>are</u> .	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	rida 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 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
MGR	VACCARO, GERARDO	16400 COLLINS AVE 2644	
		SUNNY ISLES, 33160	■ Remove
			Change
MGR	GROUP VIM CORP	16400 COLLINS AVE 2644	Add
		SUNNY ISLES, 33160	□ Remove
			☐ Change
			Remove
			Change
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ective c	date, if other than the date	of filing:			((optional)	
n effective te: If th	e date is listed, the date must be sp ne date inserted in this block do	ecific and ca oes not mee	anot be prior to out the applicable	late of filing or mo e statutory filing	re than 90 days requirement	s after filing.) F s, this date w	ursuant to 605.02 ill not be listed
	s effective date on the Departn			, ,	•		
record	l specifies a delayed effe th day after the record is	ective dat	e, but not a	n effective ti	me, at 12:	01 a.m. or	n the earlier
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Filing Fee: \$25.00