L11000128994

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SECRETARY OF STATE

T. HAMPTON

NOV 2 1 2011

EXAMINER

COVER LETTER

Division of	Corporations	,	*	
SUBJECT:	V Pı	roperties, LLC		
Sobsett.		Name of Limited Liability Company		
The enclosed Articles	of Amendment and fee(s) are s	submitted for filing.	·	
Please return all corre	:			
			1	
		Vitalij Vanusanik		
		Name of Person		
		V Properties, LLC		
		Firm/Company		
	14	4617 Grenadine Drive #7		
	<u> </u>	Address	***************************************	
Tampa, FL 33613				
		City/State and Zip Code		
	E-mail address	vitto75@gmail.com : (to be used for future annual report noti	tiestien)	
For further informatio	on concerning this matter, please	•	incaudily	
V	italii Vanusanik	. 049 .	732-6395	
Vitalij Vanusanik Name of Person		at (813) Area Code & Daytin	ne Telephone Number	
Enclosed is a check for	or the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
Reg Divi	ILING ADDRESS: istration Section ision of Corporations	STREET/COUR Registration Section Division of Corpo	on ·	
P.O. Box 6327 Tallahassee, FL 32314		Clifton Building 2661 Executive Co Tallahassec, FL 32		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2011 NOV 18 PM 12: 29 V Properties, LLC (Name of the Limited Liability Company as it now appears on our records) TALLAHASSEE, FLORIDA November 14, 2011 and assigned The Articles of Organization for this Limited Liability Company were filed on _ L11000128994 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: ANVIT Group, LLC 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 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 608, 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 Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

	Name	Address	ype of Acti
_] Add] Remove
			Add Remove
] Add] Remove
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]Add Remove
-]Add]Remove
	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.) TALLAHASSEE, FLORID	2011 NOV 18 PH 12: 29
	SOVEMBER 14, 20	<u>011 </u>	· ·
	Signature of member	r or suthorized representative of a member	

Filing Fee: \$25.00