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(Fi	Requestor's Name)	
(A	ddress)	
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(C	ity/State/Zip/Phone	÷ #)
PICK-UP	☐ WAIT	☐ MAIL
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(D	Ocument Number)	
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Certified Copies	Certificates	of Status
Special Instructions to	o Filing Officer:	
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## **COVER LETTER**

Registration Section Division of Corporations

TO:

SUBJECT:	v	ILDMARC LLC					
SUBJECT:	Name of Lim	ited Liability Company	_ <del>.</del>				
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.					
Please return all correspondent	ondence concerning this matter	to the following:					
	V	ICENCIO COLMENARES					
		Name of Person					
		VILDMARC LLC					
		Firm/Company					
4726 SW 67th AVE UNIT F7							
	· · · · · · · · · · · · · · · · · · ·						
		MIAMI, FL 33155					
		City/State and Zip Code					
	COLMEN	ARESVICENCIO@YAHOO.CO	DM				
	E-mail address: (	to be used for future annual report no	otification)				
For further information of	concerning this matter, please c	all:					
VICENCIC	COLMENARES	786 278 6:	563				
Name of Person		Area Code Dayti	me 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	Section	Street Address: Registration S					
Division of C P.O. Box 632		Division of Co The Centre of	•				
Tallahassee,	= -		oe Street, Suite 810				

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VILDM	IARC LLC					
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our d Liability Company)	records.)		-		
he Articles of Organization for this Limited Liability Compar lorida document numberL12000112650	ny were filed onSEPTEM	1BER 4, 2012	and a	assigned		
nis amendment is submitted to amend the following:						
. If amending name, enter the new name of the limited lis	ability company here:					
ne new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation	"LLC" or the a	abbreviation	"L.L.C."		
nter new principal offices address, if applicable:	4726 SW 67th	4726 SW 67th AVE UNIT F7				
Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL	33155				
			20,	3		
inter new mailing address, if applicable:	4726 SW 67t	h AVE UNIT				
Mailing address MAY BE A POST OFFICE BOX)	MIAMI,	FL 33155 7	3/2 0	;		
3. If amending the registered agent and/or registered office gent and/or the new registered office address here:	e address on our records, o	enter the nar	neof then	new regist		
Name of New Registered Agent:	VICENCIO COLMEN	ARES				
New Registered Office Address:	4726 SW 67th AVE UNIT F7					
	Enter Florida street address					
	МІАМІ	Florida	33155			
	City	_	Zip Сос	le		

## 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 for removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	VICENCIO COLMENARES	4726 SW 67th AVE UNIT F7, MIAMI, FL 33155	<b>=</b> Add
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			□Change
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	date, if other th	an the date o	of filing: _	SEPT	29,	2020	(option	al)		
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Filing Fee: \$25.00