

L12000142611

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DIVISION OF CORPORATIONS
2012 NOV 19 PM 1:53

C. LEWIS

NOV 20 2012

EXAMINER

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:

Vikke Brooks

Name of Person

V-Brooks Connections & Consulting, LLC

Firm/Company

4206 Innerrary Blvd. Apt 78 A

Address

Lauderhill, FL 33319

City/State and Zip Code

Vikkebrooks75@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Vikke Brooks

Name of Person

at (954) 594-4710

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

V-Brooks Connections & Consulting, 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 November 12, 2012 and assigned
Florida document number L12000142611.
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DIVISION OF CORPORATIONS

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This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

V-Brooks Family Connections & Consulting, 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, *Florida* *Zip Code*

New Registered Agent's Signature, if changing Registered Agent:

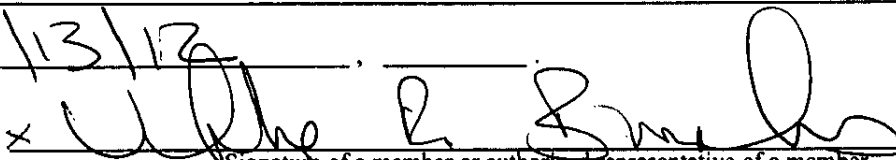
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 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

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Dated

11/13/12



Signature of a member or authorized representative of a member

VIKKE Brooks

Typed or printed name of signee

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Filing Fee: \$25.00

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