# L13000101026

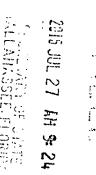
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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•	COVER LETTER #					
ι ΓΟ: Registration Section Livision of Corpor	on ations					
SUBJECT: VG Tec	h Solutions LLC					
SUBJECT:	Name of Limited Liability Company					
The enclosed Articles of Am	endment and fee(s) are submitted for filing.					
	•					
'lease return all corresponde	ence concerning this matter to the following:					
	Valei Godoy					
	Name of Person					
	VG Tech Solutions LLC					
	Firm/Company					
	1395 Brickell Ave Suite 900.					
,	Address					
	Miami FL 33131					
	City/State and Zip Code					
	valci @ vg tech solutions. com					
_	E-mail address: (to be used for future annual report notification)					
For further information conc	erning this matter, please call:					
Valei God	ni de ada aura					
Name of Pe	at (					
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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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

	utions, LLC
( <u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) imited Liability Company)
The Articles of Organization for this Limited Liability Cor Florida document number <u>L1300101026</u>	mpany were filed on 07 17 13 and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limite</u>	ed liability company here:
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1395 Brickell Avenue. Ste. 900
(Principal office address MUST BE A STREET ADDRE	issi Miami FL 33131
	North Miami, FL 33171 E
registered agent and/or the new registered office addre	ess here:
Name of New Registered Agent:	Simply Legal
New Registered Office Address:	1395 Brickell Avenue. Ste. 900  Enter Florida street address
	MIAMI , Florida 33131  City 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 = N AMBR = N	Aanager Authorized Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action		
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			Remove		
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effective date is list te: If the date ins	ther than the disted, the date must serted in this block date on the Dep	be specific and c ck does not me	annot be prior tet the applica	o date of filing	or more than 90	(optiona days after filin nents, this da	ig.) Pursu	ant to 605. ot be liste
	es a delayed after the reco		te, but nol	an effecti	ve time, at	12:01 a.m	ı. on th	e earlie
ed <u>July</u>	y 22	1/2/	2015					

Page 3 of 3

Filing Fee: \$25.00