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(Requestor's Name	e)
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	gistration Sect ision of Corpe		ĺ					
SUBJECT:	VG-TRONIC	S LLC						
SOBJECT:	-		Name of Lim	ited Liability Co	тралу			
The enclosed	d Articles of At	nendment and	d fee(s) are sub	mitted for filing	g.			
Please return	all correspond	lence concern	ing this matter	to the followin	ā:			
		GEORGE I	DEBSILLE					
			İ	Name of	Person	-		
		VG-TRON	CS LLC					
			1	Firm/Cor	npany	,		
		8260 NW 6	8TH ST					
			,	Addre	:88			
		MIAMI. FL	33166					
				City/State and	l Zip Code		-	
		accounts@v	etronics.com E-mail address: (to be used for fu	ture annual re	port notificat	ion)	
For further is	nformation con	eerning this r	natter, please c	all:				
GEORGE D	DEBSILLE			786		3706		
	Name of F	erson		at (Area	Code	Daytime Te	lephone Number	
Enclosed is	a check for the	following am	ount:					
□ \$25.00 I	Filing Fee	■ \$30.00 Fi Certifie	ling Fee & ate of Status	Certifie	Filing Fee & d Copy at copy is enclo		Certified	te of Status &
Re Di P.(illing Address: gistration Se vision of Co). Box 6327 llahassee, FL	rporations			Division The Cent 2415 N.	tion Section of Corpore tre of Talla	ations nhassee treet, Suite 8	10

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VG-TRONICS,LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 08-28-2013	and assigned
Florida document number L13000122125		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Trintipui office address most be A STREET ADDRESS)		
		2019 NOV
	,- ,-	NO T
Enter new mailing address, if applicable:		7 47 03
(Mailing address MAY BE A POST OFFICE BOX)	<u></u>	7
B. If amending the registered agent and/or registered office a	address on our records, enter the name	ne of the new registere
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	, Florida	Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	
		. ,
I hereby accept the appointment as registered agent and agre	ee to act in this capacity. I further ag	gree to comply with the

If Changing Registered Agent, Signature of New Registered Agent

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 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>	Name	<u>Address</u>	Type of Action
MGR	JORGE DEBSILLE	8260 NW 68TH ST	□Add
		MIAMI. FL 33166	\exists Remove
MBR	GEORGE DEBSILLE	8260 NW 68TH ST	
		MIAMI, FL 33166	
		 	☐ Change
			Remove
			□Change
			□Add
			□Remove
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	numg any other morma	ition, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effo <u>Note:</u>	If the date inserted in this bl	date of filing:
If the rec (b) The	ord specifies a delayed 90th day after the rec	d effective date, but not an effective time, at 12:01 a.m. on the earlier of: cord is filed.
Dated	NOVEMBER 25	2019
		Signature of a member or authorized representative of a member
	GEORGE DEBSILLE	
	2 	