## L14000026476

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## **CROSLEY LEGAL, LLC**

340 N. Rangeline Road Carmel, IN 46032 T 317-815-0340 F 317-815-9223 crosleylegal@gmail.com

June 20, 2014

Registration Section Division of Corporations PO Box 6327 Tallahassee, FL 32314

Dear Registration Section,

Enclosed please find amendment to articles of organization for a limited liability company, along with filing fee. Please contact me if there are any issues or if any additional information or documentation is needed. If possible, please forward of copy of the certificate to this office in addition to the copy sent to the individual and location set forth on the application. I have included a prepaid envelope for that purpose.

Please let me know if you have any questions or concerns.

Sincerely yours,

Bradley C. Crosley Crosley Legal, LLC

## **COVER LETTER**

TO: Re

Registration Section
Division of Corporations

SUBJECT

VCF-Florida P3 Solutions, LLC

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:

Michael A. Comparato

Name of Person

Vieste, LLC

Firm/Company

105 W. Adams St. Suite 2700

Address

Chicago, IL 60603

City/State and Zip Code

mcomparato@viestellc.com

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

For further information concerning this matter, please call:

**Bradley Crosley** 

<sub>at</sub> 317, 815-03

Name of Person

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

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limite	A Florida Limited I	ny as it now appears on our records.) .iability Company)			
The Articles of Organization for this Limited Lie Florida document number L14000026476	ability Company	were filed on February 17, 20	014 and	l assigne	:d
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabi	ility company here:			
The new name must be distinguishable and end with the v	vords "Limited Liab	ility Company," the designation "LLC" or	the abbreviation	on "L.L.C	3."
Enter new principal offices address, if applicable:		2534-A Edison Avenue			
(Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:		Ft. Myers, FL 33901			
		2534-A Edison Avenue			
(Mailing address MAY BE A POST OFFICE BOX)		Ft. Myers, FL 33901			
B. If amending the registered agent and/or the new registered off	ice address here	<u> </u>	ter the na	me of t	:he new
Name of New Registered Agent:	Michael A.	Comparato	3.5	<u> </u>	<del></del>
New Registered Office Address:	2534-A Ed	ison Avenue	,; · ·	\(\sigma\)	·.
		Enter Florida street address	7	"*)	
	Ft. Myers	, Florida	33901	-3.	4 4 4 1 <del>22 4</del>
Non-Postatored Asserts Comment of the Comment	• • • • •	City	Zip Co	ode ·	

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

VCF-Florida P3 Solutions, LLC

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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

T!41	M	A J J	T
<u>Title</u>	Name	Address	Type of Action
			□ Remove
			Add
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			□ Remove

D.	If ameno	ling any other information, enter change(s) here: (Attach additional sheets	s, if necessary.)
			<del></del>
1 40	The effecti	e date, if other than the date of filing:  ve date must be specific, cannot be prior to date of receipt or filed date and cannot be more than is document is filed by the Florida Department of State)	(optional) 90 days after
	Dated <u>J</u>	une 17 2014	
		JAC 1	
		Signature 81 a member or authorized representative of a member	er -
		Michael A. Comparato	
		Typed or printed name of signee	

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Filing Fee: \$25.00

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