## L15000006971

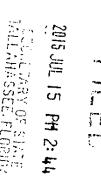
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## **COVER LETTER**

то:	Registration So Division of Cor			
CHDH	Vegvisits I	LLC		
SUBJI	ECI;	Name of Limited Liability Company  of Amendment and fee(s) are submitted for filing. pondence concerning this matter to the following:  Linsey Minnella  Name of Person  Vegvisits LLC  Firm/Company  1754 Malvern Hill Circle Apt 301  Address  Celebration, FL 34747  City/State and Zip Code  linsey@vegvisits.com  E-mail address: (to be used for future annual report notification)  concerning this matter, please call:  of Person  at (973 9192443 Area Code Daytime Telephone Number		
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		Linsey Minnella		
			Name of Person	
		Vegvisits LLC		
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		1754 Malvern Hill Circle	Apt 301	
		-	Address	
		Celebration, FL 34747		
			City/State and Zip Code	
		• • •		
		E-mail address: (	to be used for future annual report not	ification)
For fur	ther information c	oncerning this matter, please c	all:	
Linsey	Minnella			
	Name o	Its LLC    Name of Limited Liability Company		
Enclose	ed is a check for tl	ne following amount:		
<b>X</b> \$2:	5.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy

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

Vegvisits LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab	oility Company were filed on January 13, 2015	and assigned
Florida document number L15000006971	·	
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the work	ds "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
(Principal office address MUST BE A STREET.	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
		- <del> </del>
		H. H. T.
B. If amending the registered agent and/or registered agent and/or the new registered office		nter?the name of the new
registered agent and/or the new registered offic	e audress here.	
		5 2 D
Name of New Registered Agent:		9m <b>£</b>
New Registered Office Address:		**
	Enter Florida street address	
	, Florid	а
	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 = Manager ,

AMBR = Authorized Member **Type of Action Title** Name **Address** 1754 Malvern Hill Circle Apt 301, Celebration FL 34747 MGR Linsey Minnella ☐ Remove ☐ Change □ Add ☐ Remove \_□ Change □ Add **⊡**Remove Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

☐ Change

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Filing Fee: \$25.00