

LIS 000059766

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(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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2015 APR 27 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N. Culligan MAY - 3 2015

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Vantage Group-USA 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:

Rob Keeler

Name of Person

Firm/Company

5224 West SR 46, Suite 210

Address

Sanford, Florida 32771

City/State and Zip Code

duncan@thevantagegroup-international.com

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

For further information concerning this matter, please call:

Rob Keeler

at (321) 2772192

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

FILED
2015 APR 27 AM 11:39
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Vantage Group Development USA 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 April 6, 2015 and assigned
Florida document number L15000059766

This amendment is submitted to amend the following:

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

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)

PO Box 950891

Lake Mary, FL 32795

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:

Registered Agents, Inc.

New Registered Office Address:

3030 N. Rocky Point Dr Ste. 150A

Enter Florida street address

Tampa

City

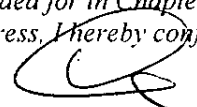
, Florida

33607

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 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:

MGR = Manager

AMBR = Authorized Member

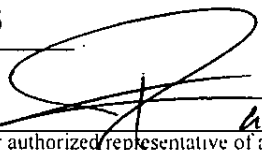
<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	The Vantage Group-International	5224 West SR 46, Suite 210	<input type="checkbox"/> Add
		Sanford	<input checked="" type="checkbox"/> Remove
		FL 32771	
AMBR	JRK Trust	Po Box 950891	<input checked="" type="checkbox"/> Add
		Lake Mary, FL	<input type="checkbox"/> Remove
		32795	
MGR	JRK Trust	Po Box 950891	<input checked="" type="checkbox"/> Add
		Lake Mary, FL	<input type="checkbox"/> Remove
		32795	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated 13 April, 2015



Signature of a member or authorized representative of a member *as trustee*

Rob Keeler as trustee

Typed or printed name of signee

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TALLAHASSEE, FLORIDA