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COVER LETTER

TO:	Registration Section Division of Corpo	on rations		
	to. LVD LLO	•		
SUBJI	ECT: LVD LLC		nited Liability Company	
		nendment and fee(s) are sub	_	
		FULTON ABRA	AHAM SANCHEZ CPA	
			Name of Person	
		FAS CPA & CO	NSULTANTS Firm/Company	
			T muzeompary	
		9010 SW 13	7 AV SUITE 201 Address	
		MIAMI FL	224.96	
		MIVMIT	City/State and Zip Code	
		FA@FASCPA	ACONSULTANTS.COM to be used for future annual report noti	
For fur	ther information con	e-man address: (cerning this matter, please c	·	ncation)
F		M SANCHEZ CPA	at (786-462-7899	
	Name of P	erson	Area Code Daytim	e Telephone Number
Enclose	ed is a check for the	following amount:		
₹ \$2:	5.00 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

LVD L	LC			
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears (Limited Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Co	ompany were filed on	10/19/2015	and assigned	d
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limit	ted liability company here	: :		
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the desi	gnation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:	4038 W 1	2 AVE		
Principal office address MUST BE A STREET ADDR	ESS) HIALEAH	FL 33012		
Enter new mailing address, if applicable:	4038 W	12 AVE		
Mailing address MAY BE A POST OFFICE BOX) HIALEAH FL 33012		· · · · · · · · · · · · · · · · · · ·		
				
3. If amending the registered agent and/or regist registered agent and/or the new registered office addr	ered office address on o	our records, <u>enter</u>		ne new
egistered agent and/or the new registered office addr	ess nere:		77	T Mg
Name of New Registered Agent:	VANESSA OREJUI	ELA	AH 9.	i e Tip
New Registered Office Address:	4038 W 12 AVE		37	
	Enter Florida	street address	***	
	HIALEAH \	, Florida	33012	
	City		Zip Code	
New Registered Agent's Signature, if changing Registered				
hereby accept the appointment as registered agent a provisions of all statutes relative to the proper and concept the obligations of my position as registered ageing filed to merely reflect a change in the registered company has been notified in writing of this change.	implete performance of ment as provided for in Cha	y duties, and I am apter 605, F.S. Or	familiar with and, if this document	d)
	If Changing Registered Agen	t, Signature of New R	egistered Agent	

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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>	<u>Name</u>	Address	Type of Action
MGR	VANESSA OREJUELA	4038 W 12 AVE	DAdd
		HIALEAH FL 33012	□ Remove
			C Change
MGR_	DIEGO GARCIA	4038 W 12 AVE	tĂAdd
		HIALEAH FL 33012	Remove
			🗆 Change
MGR	DIEGO OREJUELA	4038 W 12 AVE	D Add
		HIALEAH FL 33012	PRemove
MGR	DIEGO GARCIA	7741 NW 7TH ST APT 308	
		MIAMI FL 33126	ິລ ⊅Remove
			Change
MGR	VANESSA OREJULA	7741 NW 7TH ST	□ Add
		MIAMI FL 33126	Remove
			Change
			□ Add
			□ Remove
			Change

VANESSA OREJUELA 80%			
DIEGO GARCIA 10%			
DIEGO OREJUELA 10%			
			<u>-</u>
		1775 1775	. J6 J
		25-	-
			AH S
		\$2) 201 34	9: 37
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing e: If the date inserted in this block does not meet the applicable statutory ument's effective date on the Department of State's records.	g or more than 90 days afte filing requirements, th	is date will not	t be list
record specifies a delayed effective date, but not an effective 90th day after the record is filed.	DEV	a.m. or the	e earli
Signature of almember or authorized represen			

D.

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Filing Fee: \$25.00