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(Re	equestor's Name)	
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COVER LETTER

TO: Reg Div	istration Sec ision of Corp	ction ' porations			
CVDICA		OLDING GROUP, LLC			
SUBJECT:		Name of Limit	ted Liability Company		
The enclosed	Anticles of A	Amendment and fee(s) are subn	nitted for filing.		
Please return	ı all correspoi	ndence concerning this matter to	o the following:		
		Sukhbir Singh			
			Name of Person		
			Firm/Company		
		8752 Harpers Glen Court			
			Address		
		Jacksonville, FL 32256			
			∵		
		YAHOO, COM	20 5		
For further in	nformation co	E-mail address: (to encerning this matter, please cal	o be used for future annual report noti	fication)	7 ILEU
Sukhbir Sin	gh		904 733-8778 at ()	859-0505	_ <u> </u>
	Name of	Person	Area Code Daytim	e Telephone Number	رن در در
Enclosed is a	check for th	e following amount:			
≨ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing F Certificate of Certified Copy (additional copy i	Status &

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

VISUAN H	IOLDING GROUP, LLC
(Name of the Limited Liability C (A Florida Lir	Company as it now appears on our records.) mited Liability Company)
The Articles of Organization for this Limited Liability Com Florida document number L15000213130	npany were filed on December 28, 2015 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	d liability company here:
The new name must be distinguishable and contain 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 ADDRES	SS)
	•
	2016 Sau
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	To the second se
muning waaress that BETT ON OFFICE ISON	Child Fig-4
B. If amending the registered agent and/or registers	red office address on our records, enter the pame of the
egistered agent and/or the new registered office address	s here:
	w w
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	MEHRA FAMILY TRUST	3 DUNCAN HILL COURT	
		SAN RAMON, CA 94583	Remove
			Change
AMBR	Anup Mehra and Upasana Mehra, as trustees of the Mehra Family	3 DUNCAN HILL COURT	= Add
	Trust. dated October 27, 2014	SAN RAMON, CA 94583	Remove
			Change
			Add
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ective date, if other than the date offective date is listed, the date must be te: If the date inserted in this block cument's effective date on the Department.	specific and does not	nd cannot be meet the a	prior to da pplicable	te of filing statutory	or more than Iling requir	90 days a	otional) fler tiling. this date) Pursuan will not	t to 605.02 be listed
record specifies a delayed e he 90th day after the record			t not ar	effectiv	re tim e , a	nt 12:0	1 a.m.	on the	earlier
January 4		2016							
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Filing Fee: \$25.00