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(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	usiness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
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SECRETARY OF STALL

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COVER LETTER

Division of Con			
VIKING C	ARS LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Michaela Dammova		
		Name of Person	
	easy living USA		
		Firm/Company	
	3657 Cortez Road West, ur	nit 100	
		Address	
	Bradenton, Florida, 34236		
	easylivingusa@icloud.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
For further information of	oncerning this matter, please ca	all:	
Michaela Dammova		941 7261808	
Name o	f Person		e Telephone Number
Enclosed is a check for t	be 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

TO ARTICLES OF ORGANIZATION OF

VINING CARS LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company lorida document number	were filed on and assigned
his amendment is submitted to amend the following:	
If amending name, <u>enter the new name of the limited liab</u>	ility company here:
VIKING CONSULTING & MANAGEMENT LLC	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	3657 Cortez Road W, unit 100
Principal office address MUST BE A STREET ADDRESS)	Bradenton, Florida 34210
Enter new mailing address, if applicable:	3657 Cortez Road W, unit 100
Mailing address MAY BE A POST OFFICE BOX)	Bradenton, Florida, unit 100 342/0
 If amending the registered agent and/or registered of egistered agent and/or the new registered office address here 	ffice address on our records, enter the name of the se:
Name of New Registered Agent:	5 3 CO
New Registered Office Address:	Enter Florida street address
	. Florida
-1-10-1	City Zin 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

or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			🗆 Add
			Remove
			Change
			🗆 Add
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fective date, if other than the date on effective date is listed, the date must be specific. If the date inserted in this block document's effective date on the Department.	ecific and cannot be prior to les not meet the applicable nent of State's records.	le statutory filing requi	rements, this date will n	ot be listed
record specifies a delayed effe The 90th day after the record is		an effective time, a	at 12:01 a.m. on th	ne earliei
ted June 2nd	2016			
MIT.	ure of a member or authoriz			

Page 3 of 3

Filing Fee: \$25.00