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(Ke	equestor's Name)	
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PICK-UP		MAIL
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(Do	ocument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
	Office Use Onl	lv .



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		COVER LETTE	CR
TO: Registration S Division of Co			
CUD IF CT.	CULVER TRADING	LLC	
SUBJECT:		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:	
		Gabrielle A Pereyra	
		Name of Person	
		LON INCORPORATOR	
	201 /	Firm/Company Alhambra Circle Suite 6	00
		Address	
		Coral Gables FL, 33134	
		City/State and Zip Code eyra@vivancoyvivanco	
		to be used for future annua	
For further information c	concerning this matter, please ca	all:	
Natalie Martinez		786 at ()	802-2972
Name e	of Person	Area Code	Daytime Telephone Number
Enclosed is a check for t	he following amount:		
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee Certified Copy (additional copy is en	Certificate of Status
	ING ADDRESS: ration Section		T/COURIER ADDRESS: tion Section
Divisio	on of Corporations ox 6327	Divisior	a of Corporations Building
	assee, FL 32314		cecutive Center Circle

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Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

N	FILED	
	2018 OCT 15 AM 10:	18

(<u>Name of the Limi</u>	CULVER TR2 ited Liability Compa (A Florida Limited		SEDRE TALL N on our records.)	IARY OF STATE AHASSEE, FL
The Articles of Organization for this Limited I Florida document numberL1600014527	• • •	were filed on	04/24/2003	and assigned
This amendment is submitted to amend the foll	lowing:			
A. If amending name, enter the new name of	of the limited liab	ility company h	<u>ere</u> :	
The new name must be distinguishable and contain the v	words "Limited Liabi	lity Company," the c	lesignation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		201 Alhambra (Circle Suite 600	
<i>(Principal office address MUST_BE A STREET ADDRESS)</i>		Coral Gables FL, 33134		
Enter new mailing address, if applicable:		201 Alhambra (Coral Gables Fl	Circle Suite 600	
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and registered agent and/or the new registered o	/or registered o		ı our records, <u>ent</u> e	er the name of the new
Name of New Registered Agent:	VGV (US) LLO			
New Registered Office Address:	201 Alhambra	Circle Suite 600		
		Enter Flo. ral Gables	rida street address	33134

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added <u>or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

.

<u>Title</u>	<u>Name</u> VGV (US) LLC	<u>Address</u> 201 Alhambra Circle Suite 600	Type of Action
MGR			Add
		Coral Gables, FL 33134	🛛 Remove
			Change
MGR	Gaston Menendez	156 GIRALDA AVE	Add
		CORAL GABLES, FL 33134	Remove
			Change
		······	🗆 Add
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Natale Signature of a member or authorized representative of a member	

Natalie Martinez - ATTORNEY FOR REGISTERED AGENT

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00