

L16 000 206 74/3

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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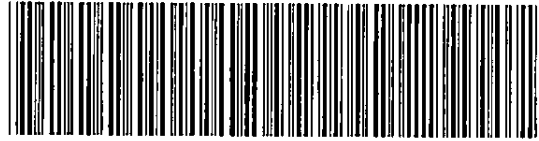
(Business Entity Name)

(Document Number)

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05/16/24--01004--005 **25.0

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MAY 15 7:50

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2024 MAY 15 PM 3:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

R. HUNT
5/15/24

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VKEY, 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 11/10/2016 and assigned
Florida document number L 1600020743.

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 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 ADDRESS)

1817 SIMONTON AVENUE

ORLANDO, FL 32806

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1817 SIMONTON AVENUE

ORLANDO, FL 32806

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:

JAKE FRIEND

New Registered Office Address:

1817 SIMONTON AVENUE

Enter Florida street address

ORLANDO


Florida 32806

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.


(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>	<u>Address</u>	<u>Type of Action</u>
MGR	JUSTIN SULLIVAN	101 SOUTH EOLA DRIVE, #703	<input type="checkbox"/> Add
		ORLANDO, FL 32801	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	JAKE FRIEND	1817 SIMONTON AVENUE	<input type="checkbox"/> Add
		ORLANDO, FL 32806	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
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JUL 10 2005
JUL 10 2005

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated MAY 15 2024

JAKE FRIEND

Typed or printed name of signee

Filing Fee: \$25.00