

Division of Corporations

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LI6000209467
Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6393

From: Account Name : FOX ROTHSCHILD LLP
Account Number : 120130000024
Phone : (215) 299-2162
Fax Number : (215) 299-2150

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: vlagana@foxrothschild.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VAULT RISK MANAGEMENT SERVICES, LLC

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COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: **VAULT RISK MANAGEMENT SERVICES, LLC**
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VANESSA LAGANA

Name of Person

FOX ROTHSCHILD LLP

Firm/Company

2 S. BISCAYNE BLVD., SUITE 2750

Address

MIAMI, FLORIDA 33131

City/State and Zip Code

VLAGANA@FOXROTHSCHILD.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

VANESSA LAGANA

305

452-6544

at ()

Area Code

Daytime Telephone Number

Name of Person

Enclosed is a check for the 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

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

VAULT RISK MANAGEMENT SERVICES, 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 11/16/2016 and assigned Florida document number L16000209467.

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)

300 FIRST AVENUE SOUTH

SUITE 401

ST. PETERSBURG, FL 33701

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida street address

City

Florida

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

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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>	<u>Address</u>	<u>Type of Action</u>
S	DANIEL ZHARKOVSKY	199 WATER STREET	<input type="checkbox"/> Add
		NEW YORK, NY 10038	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	SCOTT CARMILANI	225 NE MIZNER BOULEVARD	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	WESLEY DUPONT	199 WATER STREET	<input checked="" type="checkbox"/> Add
		NEW YORK, NY 10038	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	CHARLES WILLIAMSON	199 WATER STREET	<input checked="" type="checkbox"/> Add
		NEW YORK, NY 10038	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	GORDON KNIGHT	225 NE MIZNER BOULEVARD	<input checked="" type="checkbox"/> Add
		BOCA RATON, FL 33432	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

ARTICLE IV (Authorized Representatives) is hereby amended to read in its entirety as follows:

"The Company shall be deemed a "manager-managed" limited liability company within the meaning of the Florida Revised Limited Liability Company Act, Chapter 605, Florida Statutes. The names and addresses of the managers are set forth herein."

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77 NOV -7 AM 8:44
1957

F. Effective date, if other than the date of filing: _____ (optional)

Effective date, if other than the date of filing: _____ (optional)
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)
If a company is filing an amendment, this date will not be listed as the

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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.

Dated November 1, 2017

Signature of a member or authorized representative of a member

Thomas F. Oprentner, Esq.

Typed or printed name of signer