Division of Corporations



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To:

Division of Corporations

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From:

Account Name : PERLMAN, BAJANDAS, YEVOLI, & ALBRIGHT P.L.

Account Number : 120040000167 Phone : (305)377-0809 Fax Number : (305)377-0781

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

Email Address: Corporate @ payalaw.com

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Help Jun 24 2022

K. Brumbley

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VBH USA, LLC				
(Name of the Limited	l Liability Company as it now appears on our rec A Florida Limited Liability Company)	ords.)		
The Articles of Organization for this Limited Lia Florida document number 1.17000079000 and assigned document number 1.17000079000. This amendment is submitted to amend the follows:	The Articles of Organization we		d assigned aded on <u>0:</u>	
A. If amending name, enter the new name of t	the limited liability company here:			
The new name must be distinguishable and contain the wo	rds "Limited Liability Company," the designation "	LLC" or the abbreviation	on "L.L.C."	
Enter new principal offices address, if applica	ble:			
(Principal office address MUST BE A STREET	ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B) B. If amending the registered agent and/or re	gistered office address on our records, <u>en</u>	ter the name of th	e new rej	gistered
Name of New Registered Agent:	PBYA CORPORATE SERVICES, LLC		2022	
	200 SOUTH ANDREWS AVE, SUITE 600	:	- W	1 /
New Registered Office Address:	Enter Florida street aa	ctress .	- 'သ	言語
	FT. LAUDERDALE	Florida <u>33301</u>	PH	70 Z
New Registered Agent's Signature, if changing Re	City egistered Agent:	_ Zip (50	t
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as registeeing filed to merely reflect a change in the recompany has been notified in writing of this company has been notified.	r and complete performance of my duties tered agent as provided for in Chapter 60 egistered office address, I hereby confirn	, and I am familia 95, F.S. Or, if this a that the limited l	r with an documen iability	ıd

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
MGR	MICHAEL AVERY	8661 NW 24TH CT	□Add
		SUNRISE, FL 33322	
			Change
MGR	DIRK VAN DE POLL	2860 W. STATE RD 84	
		SUITE 107	□Remove
		DANIA BEACH, FL 33312	Change
			□Remove
			☐Chunge
		□Add	
			□Remove
			□Change
			☐Add
			☐ Change
			□Add
			□Remove
			□Change

Effective date, if other than the date of filling:	_	
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as to document's effective date on the Department of State's records. 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 ed is filed. Dated TUNE 22		
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Dated		
Signature of a member or authorized representative of a member	Dated	JUNE 22 , 2022 .
Signature of a member of authorized representative of a member		Construction of purpose of purpos
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