L17000130155

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

JUN 21 2017

Y CULKER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: [illegible]VSD, LLC
Name of Limited Liability Company

The enclosed [illegible] of Amendment and fee(s) are submitted for filing.

Please return [illegible] correspondence concerning this matter to the following:

RAVENNA MAER
Name of Person

IRA FINANCIAL GROUP
Firm/Company

1688 MERIDIAN AVENUE, SUITE 504
Address

MIAMI BEACH, FL 33139
City/State and Zip Code

[illegible] Report notification

For further information concerning this matter, please call:

RAVENNA MAER at (305) 330-4420
Name of Person — Area Code — Daytime Telephone Number

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 copies enclosed)
- ☐ $60.00 Filing Fee, Certificate of Status & Certified Copy (additional copies 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

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

WURIVSD, 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 JUNE 14, 2017 and assigned Florida document number L17000130155.

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: 3900 STANFORD AVENUE

(Principal office address MAY BE A STREET ADDRESS)

Enter new mailing address, if applicable: 3900 STANFORD AVENUE

(Mailing address MAY BE A POST OFFICE BOX) DALLAS, TX 75225

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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

_____, Florida _____
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.

_____
If 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

Title	Name	Address	Type of Action
MGR	PATRICIA E. BALLARD	523 TURTLE HATCH LANE	☐ Add
		NAPLES, FL 34103	■ Remove
			☐ Change
MGR	PATRICIA E. BALLARD	523 TURTLE HATCH LANE	■ Add
		NAPLES, FL 34103	☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

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

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E. Effective date, if other than the date of filing: _____ (optional)
(If the [illegible] cannot be prior to date of filing or more than 90 days after [illegible]) Pursuant to 605.0207 (3)(b) [illegible]

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 JUNE _____, 2017.

Signature of a member or authorized representative of a member

JAY BERGMAN, ORGANIZER

Typed or printed name of signee

Filing Fee: $25.00