

L17000134963

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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MAIL

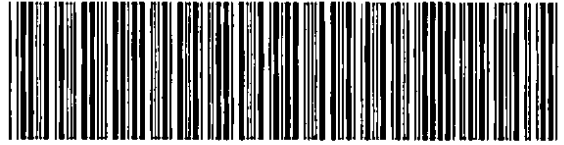
(Business Entity Name)

(Document Number)

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SECRETARY OF REVENUE  
TALLAHASSEE, FL

D. BRUCE  
OCT 14 2020

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: DEL 1 USA LLC (New Name)  
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:

JEFFREY POLLITT

Name of Person

DEL 1 USA LLC

Firm/Company

1126 S. FEDERAL, 502

Address

Fort Lauderdale, FL 33316

City/State and Zip Code

del1floridausa@gmail.com

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

For further information concerning this matter, please call:

Jeffrey Pollitt

Name of Person

at (954) 347-4302

Area Code

Daytime Telephone Number

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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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

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

DEL 1 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 6/21/2017 and assigned  
Florida document number L17000134963

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

DEL 1 USA LLC

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)

1126 S. FEDERAL, 502  
FORT LAUDERDALE, FL 33316

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

1126 S. FEDERAL, 502  
FORT LAUDERDALE, FL 33316

**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:

Valley Vc Limited Inc.

✓ New Registered Office Address:

401 E. Las Olas Blvd. 130708

Enter Florida street address

FORT LAUDERDALE

Florida

33301

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.*

Valley Vc Limited Inc.  
Jeffrey Politt, President

**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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Paul Delgado	1126 S. FEDERAL, 502 Fort Lauderdale, FL 33316	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
AMBR	Valley Vc Limited Inc.	401 E. LASOLAS # 130708 Fort Lauderdale FL 33301	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
TREAS	JEFFREY POLLITT	401 E. LASOLAS BLVD. Fort Lauderdale, FL 33301	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
REMOVE	GONZALEZ, MATHEW J	7400 Heyden Detroit 48228	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <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.)

Blank lined area for amendments, crossed out with a diagonal line.

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VALLEY Vc LIMITED INC

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E. 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)

**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.

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 Sept 3<sup>rd</sup> 2020

Valley Vc Limited Inc, Jeffrey Pollitt, President  
Signature of a member or authorized representative of a member

Jeffrey Pollitt

Typed or printed name of signee

Filing Fee: \$25.00