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## **COVER LETTER**

TO	Registration Section Division of Corporations
SU	BJECT: VY Augustu Enterprise, LLC Name of Limited Liability Company
!    The	enclosed Articles of Amendment and fee(s) are submitted for filing.
 Ple 	ase return all correspondence concerning this matter to the following:
	Vanessa Augustu Name of Person
	VY Augustu Enterprise LLC Firm/Company
	1740 Sereno Dr Address
	Davenport, FL 33896  City/State and Zip Code  Vaugustu @ cfl.rr.com  E-mail address: (to be used for future annual report notification)
For	E-mail address: (to be used for future annual report notification)  further information concerning this matter, please call:
1	Vanessa Augustu at (321) 231-4108  Name of Person Daytime Telephone Number
Enc	losed is a check for the following amount:
	\$25.00 Filing Fee \$\times \text{Certificate of Status}\$ \$\times \text{\$55.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed)} \$\times \text{\$60.00 Filing Fee, 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

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

VY Augustu E	Enterprise LLC
(Name of the Limited Liability Company (A Florida Limited Liab	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company we Florida document number <u>L 17000156019</u> .	vere filed on July 20, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabilit	ity company here:
The new name must be distinguishable and contain the words "Limited Liability	y 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)	
Enter new mailing address, if applicable:  [ [ [Mailing address MAY BE A POST OFFICE BOX]	; ·
-	17 JUL 2
B. If amending the registered agent and/or registered offic registered agent and/or the new registered office address here:	
Name of New Registered Agent:	9
New Registered Office Address:	Enter Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	

In 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 = Ma AMBR = Au	anager athorized Member					
Title	<u>Name</u>	Address	Type of Action			
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		Davenport, FL 33896	ID-Kernove			
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Iwant to be a sole member.			
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Effective date, if other than the date of filing: (options f 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 or more than 90	al)= " ing') Purs	uant to (	605 0207 <i>(</i> 3)(E
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this didocument's effective date on the Department of State's records.	ate will r	ot be !	isted as the
e record specifies a delayed effective date, but not an effective time, at 12:01 a.n. The 90th day after the record is filed.	n. on tl	he eai	rlier of:
A .			
Dated			
( ) Munitur			
Signature of a member or althorized representative of a member			
Vanessa Augustu			
Typed or printed name of signee			

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Filing Fee: \$25.00