L17000163704

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COVER LETTER

O: Registration So Division of Co			
SUBJECT: VI	rabrand Entr	RORISES, LLC ited Liability Company	
	Amendment and fee(s) are sub		
'lease return all correspo	ondence concerning this matter	to the following:	
		ly - BRAYNON Name of Person	
	BRAymen G	lobal Industries	r LPC
	1420 NW 17	8th Terrace Address	
	Pembroke	Pines, FL 35 City/State and Zip Code	3029
	devivabraye E-mail address: (nen Gamail. Com to be used forfuture annual report notif	lication)
for further information of	concerning this matter, please co	all:	
VIVA- Kelly- 13	3 RAYNEN	at (<u>954</u>) <u>931-11</u> Area Code Daytime	Lo 91 e Telephone Number
Inclosed is a check for t	he following amount:		
□ S25.00 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 Addre	ss.	Street Address:	

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327 Tallahassee, FL 32314

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

Vivabrand Enterprise (Name of the Limited Limi	Rises, LLC
(Name of the Limited Liability Compa (A Florida Limited L	nv as it now appears on our records.) iability Company)
The Articles of Organization for this Limited Liability Company	were filed on 8/1/2011 and assigned
Florida document number <u>L 17000163764</u>	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	
Braynen Globel Industries The new name must be distinguishable and contain the words "Limited Liability	, LLC
The new name must be distinguishable and contain the words "Limited Liabifi	
Enter new principal offices address, if applicable:	Penbroke Pines, FL 33029
Principal office address MUST BE A STREET ADDRESS)	Pensaoke Pines, FL 33029
Enter new mailing address, if applicable:	1420 NW 178 1 TERROCK
Mailing address MAY BE A POST OFFICE BOX)	PEMBROKE PINES FL 33029
Mulling duaress MAT BE A TOST OF TICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the name of the new registered
	,
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
No. Decision of Access Cinnessons (Colonsis Decision of Access	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	
hereby accept the appointment as registered agent and agreence or ovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as peing filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is
ompany has been nonnea in writing of this change.	

If Changing Registered Agent, Signature of New Registered Agent

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ittecti ii If t	ve date is li: he date in:	sted, the dat serted in ti	le must be spi	ecific and ca ses not mea	annot be pri et the appl	of files	iling or more	than 90 da	(option ys after fi nts, this c	ling.) Pursu	ant to 605.0 ot be listed
ord sp filed.		delayed ef	fective date.	, but not ar	ı effective	time, at 12:	01 a.m. on t	he earlier	of: (b)	The 90th	day after t
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		// //	- Fignat	10/100	A. /			member		-	
			31 <u>5</u> 1101	ture of a me	Olber or au	horized repre	sentative of	member			

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