L17000199920

(Requestor's Name)	
(Address)	
(Address)	
(City/State/Zip/Phone #	/)
PICK-UP WAIT	MAIL
(Business Entity Name	·)
(Document Number)	
Certified Copies Certificates of	of Status
Special Instructions to Filing Officer:	

Office Use Only



500305118565

11/02/17--01015--031 **25.00

FILED

17 NOV -2 PM 1: 0

SECRETARIAS SEE FLORID

J. LEGGETT

COVER LETTER

FO: Registration Section Division of Corporations
SUBJECT: Vergel Team 33 LLC Name of Limited Liability Company
Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for fifing.
Please return all correspondence concerning this matter to the following:
Martha NINO Name of Person
Name of Person
Vergel team 33 LLC
• •
22755 SW 66 th AVE APT 101
Address
Roca Raton FL 33428 City/State and Zip Code Rocay. 7333 Q Gmail. Com E-mail address: (to be used for future annual report notification)
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call;
Maitho NIWO at (561) 501 9480 Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
S25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certified Copy Certified Copy (additional copy is enclosed) 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

Vergel Tear	n 33 LLC	
(Name of the Limited	Liability Company as it now appears Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Lial Florida document number <u>L 1700019</u>		Sopt 27117 and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of t $ A / A $	he limited liability company her	<u>e</u> :
The new name must be distinguishable and contain the wor	ds "Limited Liability Company," the des	· · · · · · · · · · · · · · · · · · ·
Enter new principal offices address, if applical	ole:	Eia =
(Principal office address MUST BE A STREET	ADDRESS)	THE
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u> <u></u>	ED PH 1: 03
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the name of the new
Name of New Registered Agent:	NA	
New Registered Office Address:	N/A Enter Florid	la 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

<u>Title</u> Name **Address** Type of Action Vladimii Malai MGR □ Add 3014 Padon FC 33 428 Remove ☐ Change Moitha NINO MGR Boca Redon FL 33428 _**X**(∧dd ☐ Remove ☐ Change □ Add ☐ Remove ____ Change ____ Change □ Remove 🗖 Add _□ Remove _□ Change

••					
					
		-			
	· .				
					·
	 	 .			
				A	25 7
				33	
				<u></u>	
				LORID	27 = -
	·				= 3
			<u>.</u>		 -
ffective date, if other the an effective date is listed, the lote: If the date inserted in ocument's effective date of	date must be specific and can a this block does not meet	not be prior to date the applicable sta		0 days after filing.) P	
e record specifies a d The 90th day after tl	ielayed effective date he record is filed.	, but not an e	ffective time, a	t 12:01 a.m. or	the earlier o
nted 10-24-1					
	/				
	Marth > Signature of a mem	NINO	•		

Page 3 of 3

Filing Fee: \$25.00