L17666218321

(Re	equestor's Name)	
(Ac	ldress)	
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(Cit	ty/State/Zip/Phone	e #)
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TALLAHASSEE, FLORIDA

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COVER LETTER

Division of	Corporations		
VICE I	PRIME LLC		
30001C1.	Name of Lin	nited Liability Company	
The enclosed Article	es of Amendment and fee(s) are sub	omitted for filing.	
Please return all com	respondence concerning this matter	to the following:	
	FERNANDO BURBANO	,	
		Name of Person	
	VICE PRIME LLC		
		Firm/Company	
	3389 SHERIDAN ST #22	6	I for filing. following: Name of Person Firm/Company Address y/State and Zip Code AH_COM sed for future annual report notification) 954 9182868 at (
		Address	
	HOLLYWOOD, FL 3302	1	
		City/State and Zip Code	
	FERNANDOEBURBANO	•	
	E-maîl address: (to be used for future annual report noti:	fication)
For further informati	on concerning this matter, please c	<u>all:</u>	
FERNANDO BURE	BANO		
Na	me of Person	Area Code Daytins	e Telephone Number
Enclosed is a check	for the following amount:		
\$25.00 Filing Fe	e S30.00 Filing Fee & Certificate of Status	= -	Certificate of Status & Certified Copy

MAILING ADDRESS:

TO:

Begistration Section

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

VICE PRIME LLC			
(Name of the Limi	ted Liability Company as it now (A Florida Limited Liability Com	appears on our records.) spany)	
The Articles of Organization for this Limited L Florida document number L1700218321	iability Company were filed	on October 23, 2017	_ and assigned
This amendment is submitted to amend the following	lowing:		
A. If amending name, enter the new name of	of the limited liability comp	any here:	
The new name must be distinguishable and contain the	words "Limited Lizbility Company	," the designation "LLC" or the abbre	viztion "L.L.C."
Enter new prin ci pal offices address, if applic	able:	***	<u>→</u> > Ø
(Principal office address MUST BE A STREI	ET ADDRESS)		oo imm
			APR
			SSE SSE
Enter new mailing address, if applicable:			<u> </u>
(Mailing address MAY BE A POST OFFICE	<u>BOX)</u>		FLO FLO
			TATE ORIGI
B. If amending the registered agent and registered agent and/or the new registered or		ess on our records, <u>enter th</u>	e name of the new
Name of New Registered Agent:	FERNANDO BURBANO		
New Registered Office Address:	3389 SHERIDAN ST. #226	s ter Florida street address	
•	HOLLYWOOD	, Florida 33021	

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.

City

If Changing/Registered Agent, Signature of New Registered Agent

Zip Code

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added of removed from our records:

MGR =	Manager	
AMBR =	Anthorized	Member

<u>Title</u>	Name	Address	Type of Action
p	ERNESTO BURBANO	3389 SHERIDAN ST #226	
		HOLLYWOOD, FL 33021	■ Remove
			☐ Change
MGR	FERNANDO BURBANO	3389 SHERIDAN ST #226	[] Add
		HOLLYWOOD, FL 33021	□ Remove
			€ Change
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			□ Remove
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ective date, if other	han the date of fili	JANUARY 01,	2018	(optional)	
effective date is listed, the late inserted	e date must be specific a	nd cannot be prior to d	te of filing or more than	n 90 days after filing.) Pr	menant to 605.02
ument's effective date			sizmeny ming requ	nemens, uns usie wi	i fibi de insigu i
record specifies a			effective time,	at 12:01 a.m. on	the earlier
he 90th day after	the record is filed	1.			
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		-di	representative of a m	4	

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Typed or printed name of signee

Filing Fee: \$25.00