117000234186

(Reque	estor's Name)	
(Addre	ss)	
(Addre	ss)	
(City/S	tate/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nan	ne)
(Доси	ment Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	

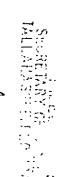
Office Use Only



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COVER LETTER

Div	ision of Corp	oorations		
SUBJECT:	V&S Contra	ecting LLC.		
		Name of Limi	ited Liability Company	
			in to ou	
i ne enclosed	1 Articles of F	Amendment and fee(s) are sub-	mutea for filing.	
Please return	all correspor	ndence concerning this matter t	to the following:	
		Shazim Mochan		
			Name of Person	
			F. (0	
			Firm/Company	
		5820 NW 14 CT		
			Address	
		Sunrise, FL 33313		
			City/State and Zip Code	
		s.mochan27@gmail.com		
		E-mail address: (t	to be used for future annual report notif	fication)
For further in	nformation co	ncerning this matter, please ca	dl:	
Shazim Moc	han		347 208-1918	
	Name of	Person	at () Area Code Davtime	: Telephone Number
Enclosed is a	check for the	e following amount:		
■ \$25.00 F	iling 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

TO:

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

17 DEC 20

Zip Code

V&S Contracting 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 11/13/2017 Florida document number _ L17000234186 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address: Enter Florida street address , Florida

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

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>	Address	Type of Action
MGR	Shazim Mochan	5820 NW 14 CT, Sunrise, FL 33313	🖬 Add
			□ Remove
			Change
			O Add
			□ Remove
			□ Change
			Add
			☐ Remove
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ective date, if other than the dieffective date is listed, the date must	late of filing:	prior to date of filing	g or more than 90 days a	ptional) fler filing.) Pursuant to	605.020
te: If the date inserted in this bloc nument's effective date on the Dep	k does not meet the a	pplicable statutory	filing requirements,	this date will not be	listed a
					
record specifies a delayed he 90th day after the reco		t not an effect	ive time, at 12:0	1 a.m. on the ea	arlier o
ed	2017				
Cr					

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00