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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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MAIL

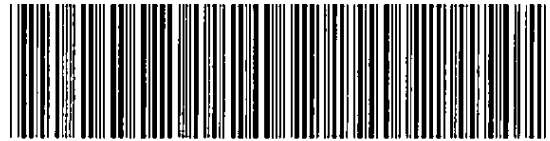
(Business Entity Name)

(Document Number)

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2024 JUN 28 PM 2:23

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: GREEN VISTA ASSET MANAGEMENT LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

THOMAS GOLDMAN

Name of Person

GOLDMAN CHURCH LAW, PLLC

Firm/Company

4357 VIRGINIA DRIVE

Address

ORLANDO, FL 32814

City/State and Zip Code

tom@goldmanchurchlaw.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

THOMAS GOLDMAN

239 961-1899
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 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 Address:

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

Street Address:

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**

GREEN VISTA ASSET MANAGEMENT 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 01/30/2018 and assigned
Florida document number 118000027022.

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)

2584 LAKE HOWELL LANE

WINTER PARK, FL 32792

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

2584 LAKE HOWELL LANE

WINTER PARK, FL 32792

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:

CHRISTIAAN VAN DER BURGH

New Registered Office Address:

2584 LAKE HOWELL LANE

Enter Florida street address

WINTER PARK

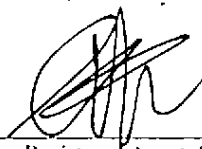
City

Florida 32792

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Mainpoint Capital Holdings LLC	2584 LAKE HOWELL LANE	<input checked="" type="checkbox"/> Add
		WINTER PARK, FL 32792	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Christiaan van der Burgh	2584 LAKE HOWELL LANE	<input checked="" type="checkbox"/> Add
		WINTER PARK, FL 32792	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Green Vista Holdings LLC	222 NORTH PARK AVE	<input type="checkbox"/> Add
		WINTER PARK, FL 32789	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Philip van Staden	222 NORTH PARK AVE	<input type="checkbox"/> Add
		WINTER PARK, FL 32789	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

[illegible]

(If 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.) Pursuant to 605.0207 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

JUNE 25, 2024



Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00