h180000036656

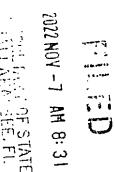
(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	ocument Number)	
Certified Copies		
Special Instructions to	Filing Officer: R	A-Signature
L		

Office Use Only



300388932583

06/10/22--01006-+023 **25.00



A. BUTLER NOV - 8 2022

COVER LETTER

	Registration S Division of Co				
C11D 1E7		om Designs, LLC			
SUBJEC	. 1 :	Name of Lin	nited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	turn all corresp	ondence concerning this matter	to the following:		
		Andres Vidaumazaga			
			Name of Person		
		Vida Custom Designs, LL	C.		
Firm/Company					
	8004 NW 154th St. #616				
	Address				
	Miami Lakes, F1, 33016				
	City/State and Zip Code				
		sales@vidacustomdesigns.c			
			to be used for future annual report not	(fication)	
For furth	er information of	concerning this matter, please c	all:		
Andres Vidaurrazaga		786 4790030			
Name of Person		at ()	ne Telephone Number		
Enclosed	l is a check for t	he 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 Addre		Street Address:	ection	
Registration Section Division of Corporations		~	Registration Section Division of Corporations		
P.O. Box 6327		The Centre of I	The Centre of Tallahassee		
Tallahassee, FL 32314		2415 N. Monroe Street, Suite 810			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Vida Custom Designs, LLC

2022 NOV -7 AM 8: 31

/Nama of the Lim		
(Frame of the time	ited Liability Company as it now appea	rs on our records.)
	ited Liability Company as it now appea (A Florida Limited Liability Company)	IMPLANCESEE, FL
he Articles of Organization for this Limited I	Liability Company were filed on $\frac{2^{\prime\prime}}{}$	9/18 and assigned
lorida document number L18000036656		
his amendment is submitted to amend the fol	flowing:	
a. If amending name, enter the new name	of the limited liability company h	<u>ere</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the	lesignation "LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if appli	icable:	
Principal office address MUST BE A STRE	ET ADDRESS)	
	-	
Inter new mailing address, if applicable:		
-	<u> </u>	
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE	<u> </u>	
-	<u></u>	
Mailing address MAY BE A POST OFFICE		ecords, enter the name of the new regi
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our	ecords, enter the name of the new regi
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our	ecords, enter the name of the new regi
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or	registered office address on our	ecords, enter the name of the new regi
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:	registered office address on our r ess here:	ecords, enter the name of the new regi
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office address	registered office address on our ress here: Andres Vidaurrazaga 8004 NW 154th St, #616	ecords, enter the name of the new regineration of the
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:	registered office address on our ress here: Andres Vidaurrazaga 8004 NW 154th St, #616	rida street address
Mailing address MAY BE A POST OFFICE 3. If amending the registered agent and/or segent and/or the new registered office address Name of New Registered Agent:	registered office address on our ress here: Andres Vidaurrazaga 8004 NW 154th St, #616 Enter Flo	

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>	Address	Type of Action
MGRM	Cynthia Vidaurrazaga	8004 NW 154th St, #616	□Add
		Miami Lakes, FL 33016	≣Remove
			□ Change
MGRM Andres Vidaurraz	Andres Vidaurrazaga	8004 NW 154th St, # 616	
		Miami Lakes, FL 33016	□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change



August 26, 2022

RECEIVED

SEP 2 9 2021

VIDA CUSTOM DESIGNS LLC 8004 NW 154 ST 616 MIAMI LAKES, FL 33016

SUBJECT: VIDA CUSTOM DESIGNS LLC

Ref. Number: L18000036656

We have received your document for VIDA CUSTOM DESIGNS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

The titles you have listed for the individuals or business entities which will manage the limited liability company are not acceptable. We cannot accept the terms: partner, officer, owner or member. You must insert the letters "MGRM" for each individual or business entity that is a member and will serve in a managerial capacity. If the individual or business entity is not a member, but will serve in a managerial capacity, you must insert the letters "MGR." We will also accept "Authorized Representative", "Authorized Person", and "Authorized Member".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 822A00019025



RECEN ED

October 5, 2022

ANDRES VIDAURRAZAGA 8004 NW 154TH ST. #616 MIAMI LAKES, FL 33016

SUBJECT: VIDA CUSTOM DESIGNS LLC

Ref. Number: L18000036656

We have received your document for VIDA CUSTOM DESIGNS LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

You failed to make the correction(s) requested in our previous letter.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Anissa Butler Regulatory Specialist II

Letter Number: 222A00022156