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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

N COOPER MAY 01 2018

• COVER LETTER *

Division of Corporations
SUBJECT: VOYANCE DEAL ESTATE 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:
Alex SIWN Name of Person
Wyance Real Estate LLC.
5114 MILENNIA GREEN DZ.
O_2 I_{A1} $I_{City/State and Zip Code}$ I_{Code}
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (407) 219-6503 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status Certificate of Status Certificate of Status 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

Vousnee Real	ESTATE LLC _		
(Name of the Limited Liability Compan (A Florida Limited Li	ny as it now appears on our records.) .iability Company)		
The Articles of Organization for this Limited Liability Company v. Florida document numberL\800078077	were filed on 3 27 2018 and assigned	i	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ility company here:		
The new name must be distinguishable and contain the words "Limited Liability	ity 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)		— —	
		L CECH	
Enter new mailing address, if applicable:	APR 30	FIL KETARN KHASS	
(Mailing address MAY BE A POST OFFICE BOX)			
	<u>~</u>	- LLS	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here	fice address on our records, enter the name of the	ie Bew	
Name of New Registered Agent:			
New Registered Office Address:	F . C		
	Enter Florida 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 = Au	thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Alex Siwis	514 Millennia Ga	ee Add
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ate, if other than the date of filing: (optional) date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purs	suant to 605.020)7 (3)
date inserted in this block does not meet the applicable statutory filing requirements, this date will effective date on the Department of State's records.	not be listed as	s the
specifies a delayed effective date, but not an effective time, at 12:01 a.m. on t	the earlier o	of:
n day after the record is filed.		
April 26, 2018.		
7 7 2010		
Sign tues of member or authorized representative of a member		

Page 3 of 3

Filing Fee: \$25.00