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COVER LETTER

TO:	Registration Se Division of Cor			
OT 155 6 674		PROMOTIONS LLC		
SUBJE	CT:	Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ondence concerning this matter	to the following:	
		RALPH M. GUITO III		
			Name of Person	
		VIGILANT PROMOTION	NS LLC	
			Firm/Company	
		500 E. KENNEDY BLVD), STE. 200	
Address TAMPA, FL 33602				
		RALPH@RALPHTHELA		
			to be used for future annual report noti	fication)
For furth	her information c	oncerning this matter, please ca	all:	
RALPH	M. GUITO III		813 223-0000 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclose	d is a check for th	ne following amount:		
\$25	.00 Filing Fec	□ \$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)
	Registr Divisio P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assee, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations enter Circle

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIGILANT PROMOTIONS, LLC	
(<u>Name of the Limited Liat</u> (A Flor	bility Company as it now appears on our records.) rida Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number L18000134074	Company were filed on MAY 30, 2018 and assigned and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the li	imited liability company here:
The new name must be distinguishable and contain the words "L	imited 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 AD	DRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	18 JUN 13 PH 1
B. If amending the registered agent and/or registered agent and/or the new registered office ac	gistered office address on our records, enter the nameof the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	Florida
	City Zin 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>	Address	Type of Action
MGR	BRANDON L. EADY	500 E. KENNEDY BLVD. TAMP	
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	6/1/18	
Effective date, if other th	an the date of filing:	than 90 days after filing.) Pursuant to 605.02
Note: If the date inserted in	this block does not meet the applicable statutory filing re	equirements, this date will not be listed
document's effective date of	n the Department of State's records.	
ne record specifies a d The 90th day after t	elayed effective date, but not an effective tim	e, at 12:01 a.m. on the earlier
6/11/18 Dated		$\overline{}$
Dated		

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee