48000142813

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TO: Registration So Division of Cor			
	ruction, LLC		
SUBJECT:	Name of Lim	tited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Kyle Krumm		
	 	Name of Person	
	V 3 Capital Group		
		Firm/Company	
	1009 Maitland Center Cor	nmons Boulevard, Suite 209	
		Address	
	Maitland, FL 32751		
		City/State and Zip Code	
	admin@v3capgroup.com		2014 - 20
	E-mail address: (to be used for future annual report notification	on) Si
For further information of	concerning this matter, please c	all:	2) T
Kyle Krumm		580 478-7000 at ()	
Name o	of Person		ephone Number 50 N
Enclosed 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 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**

V 3 Construction, LLC			
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears (d Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Company were filed on $\frac{06/08/2018}{\text{L}18000142813}$.		and assigned	
The Articles of Organization for this Limited Liability Company were filed on 06/08/2018 and assigned Florida document number L18000142813 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 "LLC." 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			
A. If amending name, enter the new name of the limited lia	(Name of the Limited Liability Company) (A Florida Liability Compan		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the des	ignation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			2
			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)		•	
	 		
		our records, <u>enter</u>	
Name of New Registered Agent:			****
New Registered Office Address:			
	Enter Florid	a street address	
-+-46F 	·	, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agen	<u>it:</u>		

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>	Type of Action
FRO	John C Vick, III	1009 Maitland Center Commons Blvd., Suite 209	Add
		Maitland, FL 32751	
			☐ Remove
			Change
			Add
			☐ Remove
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E. Effec	tive date, if other than the date of filing: (optional)		
(If an e	flective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Purst: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will n	ant to 605.0	020° d.a.s
	ment's effective date on the Department of State's records.		
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the equivalent of the secord is filed.	ne earlier	ro
(-)			
Date	September 7th 2018		

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Filing Fee: \$25.00