pg 1 of 4 → 18506176383 O 05/12/2021 12:21 PM 15612148442

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H210001914343)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CORPORATE CREATIONS INTERNATIONAL INC.

Account Number: 110432003053 Phone : (561)694-8107 Fax Number : (561)214-8442

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:___

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VR SPS LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu Corporate Filing Menu

Help



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VR SPS LLC			
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number L18000169968	were filed on 07/16/2018	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the a	abbreviation "L.L.C."	
Enter new principal offices address, if applicable:	2100 Ponce de Leon Blvd, Suite 860		
(Principal office address MUST BE A STREET ADDRESS)	Coral Gables, FL, 33134		
Enter new mailing address, if applicable:	2100 Ponce de Leon Blvd, Suite 860		
(Mailing address MAY BE A POST OFFICE BOX)	Coral Gables, FL, 33134		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the nar</u>	ne of the new registered	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	, Florida	Zip Code	
New Registered Agent's Signature, if changing Registered Agent:		N3 N3	

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 funitiar 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 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>	Name	Address	Type of Action
AMBR	Viviam Stephanie Ruiz	2100 Ponce de Leon Blvd., Suite 860	□ Add
		Coral Gubles, FL, 33134	□Remove
			⊞ Change
			□Add
			□Remove
			☐ Change
			□Add
			□Remove
			Change
		DAdd	
		□Remove	
		·	☐ Change
			□Remove
			(Change
**************************************	**************************************		
		***************************************	Remove
			Change

- 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1	

444-44-4-1	
Effective date, if other than the da	ate of filing: (optional)
if an effective date is listed, the date must be	ie specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 602.0207 k does not meet the applicable statutory filing requirements, this date will not be listed as:
e record specifies a delayed effective d rd is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated May 12th	2021
	\$
Sig	ignature of a member or authorized representative of a member
Saray Djidji, Attorney in F	•

Filing Fee: \$25.00