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Office Use Only



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COVER LETTER

	Registration Sec Division of Corp					
	VS INDUS	TRIES LLC	·			
SUBJEC						
The enclo	sed Articles of z	Amendment and fee(s) are sub	mitted for filing.			
Please ret	urn all correspoi	ndence concerning this matter	to the following:			
		CHRISTOPHER SUTTO	٧			
			Name of Person		-	
	Firm/Company					
1249 SW 159TH TERRACE						
			Address		~, b3/ -	
	PEMBROKE PINES, FL 33027				1	
		CHDISTOPHED SHTTON	City/State and Zip Code			-
CHRISTOPHER.SUTTON.1978@GMAIL.COM E-mail address: (to be used for future annual report notification)			ication)	T		
For furthe	er information co	oncerning this matter, please c	all:		တ္	ممد
CHRISTO	OPHER SUTTO	ON	305 781-0340		20	
	Name of	Person	at () Area Code Daytime	: Telephone Number	r	
Enclosed	is a check for th	e following amount:				
\$25.0	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	ite of Status &	

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

VS INDUSTRIES LLC		
(Name of the Limited Liability (A Florida	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Co	ompany were filed on NOVEMBER 9, 2018	and assigned
Florida document number 1.18000263643	- ∙	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRI	<u> </u>	1.0
Enter new mailing address, if applicable:		<u> </u>
ailing address MAY BE A POST OFFICE BOX)		<u>, m</u>
		· · · · ·
		, ?c
B. If amending the registered agent and/or registeredistered agent and/or the new registered office addresses	ered office address on our records, enter	the name of the ne
registered agent and/or the new registered office addr	ess nere:	
Name of New Registered Agent:		
New Registered Office Address:		
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = 'Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	VS HOLDINGS LLC		
		1249 SW 159TH TERRACE PEMBROKE PINES, FL 33027	Remove
			Change
MGR	CSCV HOLDINGS LLC	1249 SW 159TH TERRACE PEMBROKE PINES, FL 33027	
			□ Remove
			Change
			Add
			Remove
			- EAdd III
			Remove
		 	🗆 Aðd
			Remove
			□ Change
			Remove
			□ Change

. If amending any other information, enter change(s) here: (Attoo	· · · · · · · · · · · · · · · · · · ·	_
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	· 0	- <u>: 1</u>
Effective date, if other than the date of filing:	(optional)	
(If an effective date is listed, the date must be specific and cannot be prior to date of Note: If the date inserted in this block does not meet the applicable stat document's effective date on the Department of State's records.	f filing or more than 90 days after tiling.) Pursuant to lutory filing requirements, this date will not be	605.0207 (. listed as th
the record specifies a delayed effective date, but not an ef) The 90th day after the record is filed.	fective time, at 12:01 a.m. on the ea	rlier of:
Dated November 27 2018		
Dated November 27 2018 Christopher Stutter Signature of a member or authorized rep	are continuo of a manufar	_
f Signature of a member of authorized rep	presentative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00