L19000029960

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COVER LETTER

TO: Registration S Division of Co		•	
SUBJECT: 65	Victory Int	ternational, ited Liability Company	LLC
The enclosed Articles o	f Amendment and fee(s) are subr	mitted for filing.	
Please return all corresp	oondence concerning this matter t	to the following:	
	G's Victory I	wassee Rd.	g Company 45A-5L, LL
For further information of	bwllockhar E-mail address: (to	FL. 32818 City/State and Zip Code + e g mail. Co be used for future annual report not II:	fication)
		at (667) 228	-7134 Te Telephone Number
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 S Division of C	Section Corporations	Street Address: Registration Sec Division of Cor	ction porations

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

G's Victory International, LLC
(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co	ompany were filed on 02-05 - 2019 and assigned
Florida document number <u>L19000029960</u>	ompany were filed on 02-05 2019 and assigned
This amendment is submitted to amend the following:	55 F
A. If amending name, enter the new name of the limit	ted liability company here:
D's Victory International Mini	ng Company (USA-SL), LLC = ted Liability Company, "the designation "LLC" or the abbreviation "LLC."
The new name must be distinguishable and contain the words "Limi	······································
Enter new principal offices address, if applicable:	1931 N. Hiawassee Rd.
(Principal office address MUST BE A STREET ADDR	ESS) Orlando, FL
	32918
Enter new mailing address, if applicable:	1931 N. Hiawassee Rd. Orlando, FL.
(Mailing address MAY BE A POST OFFICE BOX)	32818
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, enter the name of the new registered
Name of New Registered Agent:	
New Registered Office Address: 193	1 N. Hiawassee Rd. Enter Florida street address
Orla	ando Florida 32818 Zip Code
New Registered Agent's Signature, if changing Registered	l 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:

	Manager Authorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	David A.M. Senessie	1931 N. Hoa wassee Rd.	EAdd
		Orlando, FL.	□Remove
;		32818	□Change
MGR	Dr. Jonathan A. Higgins	1931 N. Hiowassee Rd.	iB-Kdd
!		Orlando, FL.	□Remove
		32818	□Change
MGR	Richard Outlaw	1931 N. Hiawassee Rd.	(BAdd
<u>\</u>		Orlando, FL.	□Remove
		32818	□Change
			□Add
!			□Remove
;			□Change
<u> </u>			□Add
			□Remove
			□Change
			□Add
			□ Remove
			Change

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	te, if other than the date of filing: (optional)
	late is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605,0207 (3 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as th
	ffective date on the Department of State's records.
	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
ord is filed.	
Dated	Biehop Wm. J. Dockhart Signature of a member or authorized representative of a member
.5	2: D 1 / 2 & D A
<u>C</u>	Signature of a member or authorized representative of a member
\mathcal{B}	ishop William Leon Lockhart Typed or printed name of signee
	Typed or printed name of signee