## L19000134859

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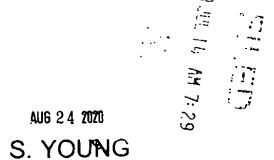
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## **COVER LETTER**

TO:

Registration Section

Division of Corporations

SUBJECT: VMC	Building Services Name of Lim	uc.	<u>.</u>	
	Name of Lim	ited Liability Company		
The enclosed Articles of a	Amendment and fec(s) are sub	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	MINH CA	<b>10</b>		
	_	Name of Ferson		
	VMC BNIL	DINY SERVICES, LLC Firm/Company		
	726 DETA	LOIT AVE.		
		Address		
	<u>Springfig</u>	OFT 32461 City/State and Zip Code		
	MCA0 850 ( E-mail address: (	e hormail.com to be used for future annual report not	ification)	
For further information co	oncerning this matter, please c			
MINH CAO	)	at ( <u>954</u> ) <u>400- 95</u> Area Code Daytir	131	
Name of	f Person	Area Code Daytir	ne Telephone Number	
Enclosed is a check for th	ne following amount:			
X \$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		Street Address:		
Registration S			Registration Section Division of Corporations	
Division of Corporations P.O. Box 6327		The Centre of	•	
Tallahassee, F			oe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VMC BUILDING SERVICE	es, uc	
(Name of the Limited Liability Compa (A Florida Limited	inv as it now appears on our records.)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L19000134859</u> .	were filed on \$ 15 2019	and assigned []
This amendment is submitted to amend the following:		1: 29
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or (	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	726 DETROIT AVE	
(Principal office address MUST BE A STREET ADDRESS)	JPRINGFIELD, FL 32	401
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</u>	name of the new registered
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		
	Enter Florida street address	
	Florid	aZip Code
N D :	Çiv	Zip Code
New Registered Agent's Signature, if changing Registered Agents		and the second of the second o
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I provided for in Chapter 605, F.S.	am familiar with and Or, if this document is

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	Vu cao	116 S. CHARLENE DR	XAdd
		116 S. CHARLENE DR PANAMA City FL 32404	□Remove
			©Change
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

_	
an effec ote: If	e date, if other than the date of filing:
record : is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the l.
	744 / 1/a 202-
nted	July 16 2020
ated	Signature of a member or authorized representative of a member