Division of Corporations Electronic Filing Cover Sheet

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.

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Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : V & A BUSINESS SOLUTION INC

Account Number : I2016000021

Phone

: (954)865-6607

Fax Number

: (954)933-2634

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

Email Address:_____

RECEIVE (1)

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN ASSOCIATES GONZALEZ WHITE LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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JUL 29

EXAMINER

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:	Registration Se Division of Cor	ection rporations				
SUBJEC		SSOCIATES GONZALEZ W	HITE LLC			
OULL		Name of Lin	nited Liability Company			
The enclo	osed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please ret	turn all correspo	ondence concerning this matter	to the following:			
		JUAI	N E. GONZALEZ SUAREZ			
			Name of Person			
MANAGER						
Firm/Company						
3151 PANTANAL LANE						
			Address			
			KISSIMMEE FL 34747		19 JUL 26	
		-	City/State and Zip Code		F .	"T
			.a.businessolutions@gmail.com		26	
			to be used for future annual report notifi	cation)		T
For further	er information o	concerning this matter, please c	all:			1. 0
JUAN E.	GONZALEZ S	SUAREZ	954 865-6607		15. 47 13. 47	
_	Name o	f Person		Telephone Number		
Enclosed	is a check for th	he following amount:				
	0 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing I Certificate of Certified Copy (additional copy)	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

	ATES GONZALI		
Name of the Limiter	Liability Comma A Florida Limited	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Lia	bility Company	were filed on 06/04/2019	and assigned
Florida document number L19000; 48844			
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited lisb	ility company here:	
The new name must be distinguishable and contain the wo	rds "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:		
(Principal office address MUST BE A STREET	ADDRESS)	3157 PANTANAL LANE	
		KISSIMMEE FL 34747	
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE B	<u>oxi</u>	3157 PANTANAI. LANE	
		KISSIMMEE FL 34747	
70. 15			6 79
B. If amending the registered agent and/or registered agent and/or the new registered offi	r registered of	ffice address on our records, ente	er the name of the nev
	ec nami ess tiet	Σ•	N 1
Name of New Registered Agent:			on
New Registered Office Address:	3157 PANTAN	AL LANE	4 9
		Enter Florida street address	731 FT
	KISSIMMEE	Florida	34747
N		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, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	GONZALEZ SUAREZ, JUAN E	3157 PANTANAL LANE	
		KISSIMMEE FL 34747	Remove
	DI ANCO TIDUCA MARK		□ Change
AMBR	BLANCO ZUNIGA, MARIA ABIGAL	3157 PANTANAL LANE	
		KISSIMMEE FL 34747	Remove
			Change
			Add
			□ Remove
			Change 19 Add
			□ Remove
			□ Remove
			С Сһалдо
			
			□ Remove

Effective date, if other than the date of filling:). If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
Effective date, if other than the date of filing: JULY 26, 2019 (optional) (If an effective date 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)xl Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: The 90th day after the record is filled.			-
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1.0.00	Dated JULY 26 2019		
	La Co		
Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member		
JUAN E. GONZALEZ SURREZ Typed or printed name of signee	JUAN E. GONZALEZ SUAREZ		

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Filing Fee: \$25.00