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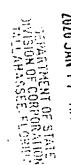
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COVER LETTER

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	Registration Se Division of Cor		,	
SI:DIEC	VIETRUST	FINANCIAL GROUP, LLC	, j	
SOBJEC	·1:	Name of Lim	ited Liability Company	
The encle	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspo	ondence concerning this matter	to the following:	
		TIM PHAM		
			Name of Person	
		VIETRUST FINANCIAL	GROUP LLC	
			Firm Company	-
		1814 WOODWARD ST		
			Address	
		ORLANDO, FL 32803		
			City/State and Zip Code	
		TIMPHAMFL@GMAIL.CO	OM to be used for future annual report noti	
For furthe	er information c	oncerning this matter, please ca	·	meanon)
TIM PIL		3		
			407 257-2569 at ()	
	Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.0	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 Addres Registration S Division of C	Section	<u>Street Address:</u> Registration Sed Division of Cor	

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

20

VIETRUST FINANCIAL GROUP LLC		AL OZ
(Name of the Limited Liabilit	y Company as it now appears on our recoi Limited Liability Company)	<u>(ds.)</u> 507
(A Florida	Limited Liability Company)	SO ₹
The Articles of Organization for this Limited Liability Co	ompany were filed on 06/24/2019	TO and assigned
Florida document number L19000165967	_·	7: 08
This amendment is submitted to amend the following:		-
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limi	ted Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	
		· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, ente	r the name of the new registered
agent and/or the new registered office address here.		
Name of New Registered Agent:		
New Registered Office Address:		-
	Enter Florida street addre	NSS .
	· · · · · · · · · · · · · · · · · · ·	lorida
	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 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
AMBR	TIMOTHEE PHAM	1814 WOODWARD ST	
		ORLANDO, FL 32803	□Remove
			■ Change
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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	e date of filing:	to date of filing or more than 90	_ (optional) days after filing.) Pursuant to 605.020
Effective date, if other than the (If an effective date is listed, the date me Note: If the date inserted in this bedocument's effective date on the I	mock mocs not incertific applica	ane statutory ming requiren	ents, this date will not be listed a
document's effective date on the I	Department of State's records.		ents, this date will not be listed as
in the three tractice in this i	Department of State's records.		ents, this date will not be listed as
document's effective date on the I ne record specifies a delayed effecti ord is filed.	Department of State's records. ve date, but not an effective tir		ents, this date will not be listed as