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R. WH II' DEC 15 2020 · -2 f: 4:07

# COVER LETTER

SUBJECT:	Vice Glob	al LLC	
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.	
Please return all correspo	ondence concerning this matte	er to the following:	
	Forres	st Hamm	
	Vice	Global ILC	
		Firm/Company	<del></del>
	5965	Stirling Road	# 125
		7 Kildi Cij	
	Davi	ie FL 33314	<u>-}</u>
		City/State and Zip Code	1
•	E-mail address:	(to be used for future annual report notif	a. ( . Com
For further information c		•	
Robu Name o	rt Bailey f Person	at ( 305 ) 788 - 6	235 Telephone Number
	•		
Division of Corporations  SUBJECT:   Vice Global LLC   Name of Limited Liability Company  The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:    Forcest Hamm   Name of Person			
\$25.00 Filing Fee		Certified Copy	Certificate of Status &

Mailing Address:
Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vice Gla	5621, LLC 20/11 -9 PH 4: 07
( <u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on our records.) lorida Limited Liability Company)
The Articles of Organization for this Limited Liabili	ity Company were filed on 7-18-2019 and assigned
This amendment is submitted to amend the following	
A. If amending name, enter the new name of the	1
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable	: N/4
(Principal office address MUST BE A STREET AI	DDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX	
B. If amending the registered agent and/or regist agent and/or the new registered office address he	tered office address on our records, <u>enter the name of the new registered</u> re:
Name of New Registered Agent:	NA
New Registered Office Address:	Enter Florida street address
	, Florida
	z.ip 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

11 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
Manuger	Robert Bailey	5966 Stirling Road #125	X[Add
		Davie, Florida 33314	□Remove
			□Change
		<del></del>	🗀 Add
			□Remove
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fective date, if other	than the date of filing:	<del> </del>	(optional)	
n effective date is listed, ote: If the date inserte	he date must be specific and cannot d in this block does not meet th	t be prior to date of filing or mo e applicable statutory filing	ore than 90 days after filing.) Pursuant g requirements, this date will not b	to 605.0207 be listed as
	e on the Department of State's		-	
	ed effective date, but not an eff	ective time, at 12:01 a.m. c	on the earlier of: (b) The 90th da	y after the
is filed.				
ited Novembra	r 1			
ited / Wirming	_5, 2	020 1.		
	-first	9/1/2		
		/ // // //		
	Signature of a member	r wr withorized representative	of a member	_
	Signature of a membe.	r or withorized representative	of a member	_

Filing Fee: \$25.00