

L19000196745

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

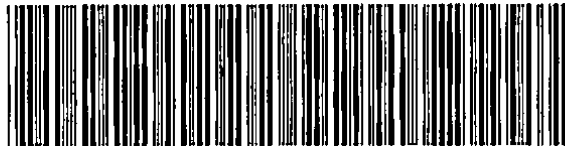
(Business Entity Name)

(Document Number)

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CLERK OF COURT
JANET M. HARRIS

COVER LETTER

Registration Section
Division of Corporations

VITRAL, LLC

SUBJECT: _____
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DORAYIS ALMAGUER SANCHEZ

Name of Person

Firm/Company

3624 BAYSHORE CIRCLE

Address

TAVARES, FL 32778

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DORAYIS ALMAGUER SANCHEZ

352

408-6910

Name of Person

at (_____) _____

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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

**TO
ARTICLES OF ORGANIZATION
OF**

VITRAL, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 08/01/2019 and assigned

da document number L19000196745

amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

New name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

If new principal offices address, if applicable:

Principal office address MUST BE A STREET ADDRESS)

If new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

If amending the registered agent and/or registered office address on our records, enter 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 address

_____, Florida _____
City Zip Code

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

moved from our records:

R = Manager

MR = Authorized Member

	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
R	YUNIOR LAZARO ISLA	3624 BAYSHORE CIRCLE, TAVARES, FL 32778	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		CHANGE TITLE	<input checked="" type="checkbox"/> Change
R	DORAYIS ALMAGUER SANCHI	3624 BAYSHORE CIRCLE, TAVARES, FL 32778	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		CHANGE TITLE	<input checked="" type="checkbox"/> Change
	EDILBERTO LAZARO ISLA	2477 FARRINGDON DR, TAVARES, FL 32778	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Change

amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

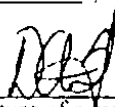
Effective date, if other than the date of filing: _____ (optional)

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)(b)

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.

record 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 is filed.

ated _____ OCTOBER 7th _____ 2020 _____



Signature of a member or authorized representative of a member

DORAYIS ALMAGUER SANCHEZ

Typed or printed name of signee