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| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
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SECRETARY OF STATE
ALLIAHASSEE, FLORIDA

COVER LETTER

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Registration Section Division of Corporations

| SUBJECT: | Voulges LL0 | | J | | |
|----------------------|---|---|---|--|--|
| JODULE I. | | Name of Lim | ited Liability Company | | |
| The enclosed | l Articles of A | Amendment and fee(s) are sub | mitted for filing. | | |
| Please return | all correspon | idence concerning this matter | to the following: | | |
| | | Miguel Pinango | | | |
| | | | Name of Person | | |
| Voulges LLC | | | | | |
| | | | Firm/Company | | |
| | | 10052 NW 41st Street | | | |
| | | | Address | | |
| Doral, Florida 33178 | | | | | |
| | | | City/State and Zip Code | | |
| | | miguel_pinango@outlook.c | | | |
| | | E-mail address: (| to be used for future annual report no | tification) | |
| For further in | iformation co | ncerning this matter, please co | all: | | |
| Miguel Pinar | ngo | | 407 409-5384 at () | | |
| | Name of | Person | Area Code Dayti | me Telephone Number | |
| Enclosed is a | check for the | e following amount: | | | |
| ■ \$25.00 F | iling Fee | S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | ☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) | |
| Reg Div P.O | ling Address gistration So vision of Co D. Box 6327 lahassee, F | ection orporations | Street Address: Registration Solivision of Co The Centre of 2415 N. Monn Tallahassee, F | orporations Tallahassee oe Street, Suite 810 | |

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Voulges LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) he Articles of Organization for this Limited Liability Company were filed on $\frac{08/29/2019}{1}$ _ and assigned lorida document number <u>1.19000220789</u> his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: unlight Technologies LLC ne new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." nter new principal offices address, if applicable: Principal office address MUST BE A STREET ADDRESS) nter 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 th gent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address Florida Zip Code City w Registered Agent's Signature, if changing Registered Agent: hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and cept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability mpany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

f amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added r removed from our records:

1GR = Manager MBR = Authorized Member

| <u>itle</u> | <u>Name</u> | Address | Type of Action |
|-------------|-------------|--------------|----------------|
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| ective date, if other than the | data of filing: | | (optional) | |
| effective date is listed, the date must e: If the date inserted in this bloument's effective date on the De | be specific and cannot be priced does not meet the appli | cable statutory filing re | than 90 days after filing.) P | |
| cord specifies a delayed effective filed. | date, but not an effective | time, at 12:01 a.m. on t | he earlier of: (b) The 9 | 90th day after the |
| 09/11/2020 ed | 10:00 a,m | | | |
| | M. DX | | | |
| | llece 102 | | | |
| | Signature of a member or aud | norized representative of a | ı niember | |

Filing Fee: \$25.00