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COVER LETTER

TO: Registration Sc Division of Cor			
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SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	Name of Limited Liability Company Sof Amendment and fee(s) are submitted for filling. espondence concerning this matter to the following: JUAN F		
	JUAN F		
		Name of Person	
	LATIN AMERICAN LEG	AL	
		Firm/Company	
	17071 W DIXIE HWY 30	I-Λ	
		Address	
		City/State and Zip Code	•
	E-mail address: (to be used for future annual report notific	cation)
For further information e	oncerning this matter, please ea	all:	
JUAN F			
Name o	rt Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	he following amount:		
☐ \$25.00 Filing Fee	■ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
<u>Mailing Addres</u> Registration			ion
Division of C	lorporations	-	
P.O. Box 631	<u>' /</u>	The Centre of Ta	Hanassee

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

Tallahassee, FL 32314

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VPMATCO, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on _______ and assigned ______ and assigned Florida document number $\frac{L19000224638}{}$ This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: GBS AQUACULTURE, LLC 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: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. 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

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.

f amending Authorized Person(s) authorized to manage. <u>enter the title, name, and address of each person_being added by removed from our records</u>:

MGR = Manager

AMBR = Authorized Member

<u>Fitle</u>	<u>Name</u>	Address	Type of Action
			□Remove
			∃Change
			∐Remove
			Change
			🗀 Remove
			□ Change
			□Remove
			
			∐Remove
			□Change

	Signature of a member	or authorized record	Hogo-	Linea	17 -
Dated October 1	: 2020	<u></u> .	A		
he re cord specifies a delayed effectivories filed.	ve date, but not an effi	ective time, at 12:0	La.m. on the earlier	of: (b) The 90th day	after the
Effective date, if other than the (tf.m effective date is listed, the date mu Note: If the date inserted in this b document's effective date on the U	lock does not meet the	e applicable statute	ing or more than 90 da ry filing requiremen	es after filing.) Putsuant t ts, this date will not be	o 605.0207 (e listed as tl
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Typed or printed name of signee