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COVER LETTER

SHB IEC	 1			
SUBJEC	1:		nited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	um all correspo	ondence concerning this matter	to the following:	
		Kristen Ellison		
			Name of Person	
	Division of Corporations VX2 Development Group, LLC Name of Limited Liability Company the enclosed Articles of Amendment and fee(s) are submitted for filing. ease return all correspondence concerning this matter to the following: Kristen Ellison			
		Name of Limited Liability Company Tricles of Amendment and fee(s) are submitted for filing. It correspondence concerning this matter to the following: Kristen Ellison		
			Address	
		Tallahassee, FL 32312		
			City/State and Zip Code	
		-		
			•	tification)
For furthe:	r information c	oncerning this matter, please c	all:	
Vu Cao				
	Name o	f Person	Area Code Daytin	me Telephone Number
Enclosed i	s a check for th	ne following amount:		
■ \$25.00) Filing Fee		Certified Copy	Certificate of Status & Certified Copy
				ection
Ĩ	Division of C	orporations	Division of Co	orporations
	O. Box 632 allahassee F			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

31:3 : 2 2020 VX2 Development Group, 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 September 25, 2019 and assigned Florida document number ____L19000242416 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 7402 Atlantic Blvd Enter new principal offices address, if applicable: Suite 4 (Principal office address MUST BE A STREET ADDRESS) Jacksonville, FL 32211 7402 Atlantic Blvd Enter new mailing address, if applicable: Suite 4 (Mailing address MAY BE A POST OFFICE BOX) Jacksonville, FL 32211 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.

City

_, Florida __

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	Vuong Cao	7402 Atlantic Blvd	
		Suite 5	≣Remove
		Jacksonville, FL 32211	□Change
			□Add
			□Remove
			□Change
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f an eff Note:	ve date, if other than the date of filing:
e recor	d 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 ed.
Dated	June 5th 2020
	·

Typed or printed name of signee