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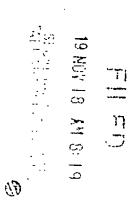
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COVER LETTER

	egistration Sec ivision of Corp		•					
011D 1D 621	V-6 Holding	gs LLC						
SUBJECT	:							
The enclos	ed Articles of a	Amendment and fee(s) are subr	nitted for filing.					
Please retu	rn all correspo	ndence concerning this matter t	to the following:					
		Joseph Telles						
			Name of Person					
		Joseph T Telles Inc						
			Firm/Company	 				
12773 W Forest Hill Blvd Ste 105								
			Address					
		Wellington, FL 33414						
		City/State and Zip Code						
		jtelles@telles-accounting.co						
		E-mail address: (t	to be used for future annual report not	ification)				
For further	information co	oncerning this matter, please ca	all:					
Joseph Te	lles		561 784-0100					
Name of Person			at () Area Code Daytim	ne Telephone Number				
Enclosed i	s a check for th	e 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:

TO:

Registration Section Division of Corporations P.O. Box 6327

Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

V-6 Holdings, 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 $\frac{10/31/2019}{10/31/2019}$ and assigned This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: V6 Holdings, LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 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 , Florida City

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

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
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Dated		8		2019	·				
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Typed or printed name of signee

Filing Fee: \$25.00