

L 2000000 9339

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

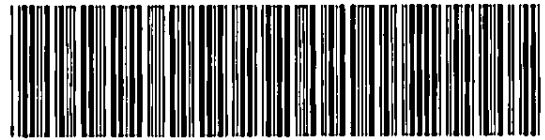
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2020 FEB -5 PM 1:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Name chg

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ALBRITTON

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: VJAI Holdings LLC

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

VELLORE M JAISHANKAR

Name of Person

VOOVEST LLC

Firm/Company

1922 ARBOR PARK DR

Address

WINTER PARK, FL 32789

City/State and Zip Code

vmjaishankar@gmail.com

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

For further information concerning this matter, please call:

VELLORE M JAISHANKAR

407
at ()

669-6400

Name of Person

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VJAI HOLDINGS LLC

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

FILED
2020 FEB -5 PM 1:22
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 01/02/2020 and assigned
Florida document number L20000009339.

This amendment is submitted to amend the following:

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

VOOVEST 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)

1922 ARBOR PARK DR

WINTER PARK, FL 32789

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1922 ARBOR PARK DR

WINTER PARK, FL 32789

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:

VELLORE M JAISHANKAR

New Registered Office Address:

1922 ARBOR PARK DR

Enter Florida street address

WINTER PARK


Florida 32789

City

Zip Code

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>	<u>Address</u>	<u>Type of Action</u>
AMBR	VELLORE M JAISHANKAR	1922 ARBOR PARK DR	<input type="checkbox"/> Add
		WINTER PARK, FL 32789	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	VIDHYALAKSHMI V JAISHANKAR	1922 ARBOR PARK DR	<input type="checkbox"/> Add
		WINTER PARK, FL 32789	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

This image shows a single sheet of white paper with horizontal blue or grey ruling lines. Two diagonal lines are drawn across the page, starting from the left margin and extending towards the right, creating a large parallelogram shape in the center. The lines are thin and light-colored. There are some small dark specks or marks on the paper, particularly near the top left corner.

(If 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)

If the 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 record is filed.

Signature of a member

VELLORE M JAISHANKAR

Typed or printed name of signee