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COVER LETTER

	egistration S ivision of Co					
SUBJECT	VIRAGO	MANAGEMENT SERVICES	LLC			
o o borno	•	Name of Lir	nited Liability Company			
The enclose	ed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please retur	rn all correspo	ondence concerning this matter	r to the following:			
		Stuart Kramer, Esq.				
			Name of Person			
		Milgrim Law Group				
			Firm/Company	· 		
		3216 Corrine Drive				
			Address			
		Orlando. FL 32803				
			City/State and Zip Code	<u> </u>		
		ken@cornellhomeslic.com				
			to be used for future annual report no	tification)		
For further	information c	oncerning this matter, please c	all:			
Stuart Kran	ner, Esq.		407 790-4966			
	Name o	f Person		mc Telephone Number		
Enclosed is	a check for th	ne 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)		
	iling Addres		Street Address:	and in a		
Registration Section Division of Corporations			Registration Section Division of Corporations			
P.C	D. Box 632	7	The Centre of	Tallahassee		
Ta	llahassee, F	L 32314	2415 N. Monro	e Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIRAGO MANAGEMENT SERVICES LLC		
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our reco Limited Liability Company)	rds.)
The Articles of Organization for this Limited Liability Co	ompany were filed on 02/06/2020	and assigned
Florida document number	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ted liability company here:	
The new name must be distinguishable and contain the words "Limit	ted Liability Company," the designation "LL	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	ESS)	7020
Enter new mailing address, if applicable:		-0 , .:
(Mailing address MAY BE A POST OFFICE BOX)		المعتبلات الم
		<u></u>
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our records, ente	r the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addre	2.55
		lorida
	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>	Type of Action
MGR	Kenneth B Cornell	6031 Old Cheney Hwy	≅Add
		Apt 37	□Remove
		Orlando, Fl. 32807	Change
AMBR	Michelle R Dallas	6031 Old Cheney Hwy	5
		Apt 37	_
		Orlando, FL 32807	
AMBR	Amanda L Wesson	6031 Old Cheney Hwy	
		Apt 37	
		Orlando, FL 32807	□Change
			□Remove
			□Change
			□Remove
			□Change
			□Add
			□Remove
			□ Change

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1000. 11	e date, if other than tive date is listed, the date the date inserted in thi t's effective date on the	s block does not	meet the applic	able statutory fr	(opti r more than 90 days afte ling requirements, thi	ional) r filing.) Pursuant to 605. is date will not be liste	0207 ed as
record s l is filed	specifies a delayed effe l.	ctive date, but n	ot an effective t	ime, at 12:01 a.i	n, on the earlier of: (b	b) The 90th day after	the
ated	ebruary 26		2020	—:			
			B. C				
		Signature of	a member or author	orized representat	ive of a member		

Filing Fee: \$25.00