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	Registration So Division of Co		•	
eub iez	HIGHER V	VIBEZ HEADQUARTERZ LL	c	,
SODJEC		/IBEZ HEADQUARTERZ LL Name of Lin	nited Liability Company	
The encle	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please 10	tum all correspo	ondence concerning this matter	to the following:	
		JENISE BORRERO		
			Name of Person	
		HIGHER VIBEZ HEADQ	UARTERZ LLC	
			Firn/Company	
		670 NW 112TH STREET		
			Address	
		MIAMI, FLORIDA 33168		
			City/State and Zip Code	
		HIGHERVIBEZHEADQU.	ARTERZ@GMAIL.COM to be used for future annual repor	notification)
For furthe	er information c	oncerning this matter, please of		Houncarony
JENISE I	BORRERO		786 461-750 at ()	
	Name o	f Person	Area Code Da	ytime Telephone Number
Enclosed	is a check for th	ne following amount:		
圖 \$25.0	00 Filing Fee	(I) \$30.00 Filing Fee & Certificate of Status	S55.00 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

IGHER VIBEZ HEADQUARTERZ LLC

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

Florida document number L20000045261 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 "LE 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 agent and/or the new registered office address here:	
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 "LE" or	
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "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	
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(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	
(Mailing address MAY BE A POST OFFICE BOX) MIAMI, FLORIDA 33169 B. If amending the registered agent and/or registered office address on our records, enter the name of the new	
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(Mailing address MAY BE A POST OFFICE BOX) MIAMI, FLORIDA 33169 B. If amending the registered agent and/or registered office address on our records, enter the name of the new	
	-
JENISE BORRERO	/ registered
Name of New Registered Agent: TENISE BORKERO	
New Registered Office Address: 670 NW 112TH STREET	 -
Enter Florida street address	
MIAMI , Florida 33168	
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.

Januar Borraro

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

Title	Name	Address	Type of Action
MGRM	JENISE BORRERO	670 NW 112TH STREET	
		MIAMI, FLORIDA 33168	
			ClChange
MGRM	MICHAEL RIVAS	670 NW 112TH STREET	
		MIAMI, FLORIDA 33168	
			[]Change
			Remove
			☐ Change
			[]Change
			□Add
		□Remove	
			ElChange
			[]Add
			(DRemove

	ami, florida 33168
MICHAEL RIVAS -OWNER	
670 NW 112TH STREET, MIA	ami, florida 33168
ctive date, if other than the date frective date is listed, the date must be 1 If the date inserted in this blockment's effective date on the Depart	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 6 ok does not meet the applicable statutory filing requirements, this date will not be li
ord specifies a delayed effective d filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day at
d SEPTEMBER 20	, 2020
	ignature of a member or authorized representative of a member

C''' 13 #35.04