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2022 FEB IL PM 2: 55
SECRETARY OF STATE
SECRETARY OF STATE

A. BUTLER FEB 2 3 2022

## **COVER LETTER**

	ion of Corp Dictter Boo	okkeeping Services, LLC	•	,
SUBJECT: _			nited Liability Company	
The enclosed A	Articles of a	Amendment and fee(s) are sub	omitted for filing.	
Please return a	ll correspoi	ndence concerning this matter	to the following:	
		Lorena Dictter		
			Name of Person	
		Dictter Bookkeeping Se	rvices, LLC	
			Firm/Company	
		13553 FL -54 #225		
	Address Odessa. FL 33556			
		Odessa. FL 33556		
Please return all c		lorenadictter@gmail.com	City/State and Zip Code	
		<del>-</del>	to be used for future annual report notif	(Cation)
For further info	ormation co	neerning this matter, please c	-	(Cation)
Lorena Dictte	er		347 453-1404 at ( )	
	Name of	Person		e Telephone Number
Enclosed is a c	heck for the	e following amount:		
■ \$25.00 Fili	ing 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
Mailie	na Addrove		6	

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

FILED

Dictter Bookkeeping Services, LLC

2022 FEB 14 PM 2:55

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

7417 ALLA OF STATE The Articles of Organization for this Limited Liability Company were filed on  $\frac{2/10/2020}{1}$ and assigned Florida document number L20000046528 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: Virtual Lorenita LLC The new name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." 13553 FL-54 #225 Enter new principal offices address, if applicable: Odessa, FL 33556 (Principal office address MUST BE A STREET ADDRESS) 13553 FL-54 #225 Enter new mailing address, if applicable: Odessa, FL 33556 (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 \_\_\_ CivNew 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 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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			□Remove
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			□Change

<u>lote:</u> If t	date, if other than the date of filing:	07 - as (
record sp Lis filed.	secifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b). The 90th day after the	ie
2/9 ated		
	Signature of a member or authorized representative of a member	
	Lorena Dictter  Typed or printed name of signee	

Filing Fee: \$25.00