K20 0000 59372

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SECRETARY OF STATE

	Registration Se Division of Cor				
eun iez		JL VINTAGE LLC			
SUBJEC	.I:	Name of Lim	ited Liability Company		
The enclo	osed Anicles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	turn all correspo	ondence concerning this matter	to the following:		
		ANGEL EDUARDO MEI	DINA		
	Name of Person VIEWTIFUL VINTAGE LLC				
		VIEWTIFUL VINTAGE	LLC		
			Firm/Company		
		15030 SW 43RD TER			
			Address		
		MIAMI, FL 33185			
			City/State and Zip Code		
		ANGELMEDINA818@HC			
r			to be used for future annual report notification)		
For furth	er information c	oncerning this matter, please c	all:		
ANGEL EDUARDO MEDINA		EDINA	786 346-6172 at ()		
	Name o	f Person	Area Code Daytime Telephone Number		
Enclosed	is a check for th	ne following amount:			
■ \$ 25.0	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 Addres Registration S		Street Address: Registration Section		
	Division of C	orporations	Division of Corporations		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee		

Tallahassee, FL 32303

TO ARTICLES OF ORGANIZATION OF

VIEWTIFUL VINTAGE LLC		
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on Liability Company)	our records.)
The Articles of Organization for this Limited Liability Company Florida document number 1.20000059372	y were filed on	2020 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	bility company here:	
N/A		
The new name must be distinguishable and contain the words "Limited Liab	ility Company," the design	nation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/A	3E 3E
(Principal office address MUST BE A STREET ADDRESS)		
		AAA — III
Enter new mailing address, if applicable:	N/A	ASSERT
(Mailing address MAY BE A POST OFFICE BOX)		77 - 22 - 25 - 25 - 25 - 25 - 25 - 25 -
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our recor	ds, enter the name of the new regist
Name of New Registered Agent:		
Now Pagistand Office Address		
New Registered Office Address:	Enter Florida s	treet address
		, Florida
New Registered Agent's Signature, if changing Registered Agent	City :	Zip Code
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	- ree to act in this capa performance of my provided for in Chap	duties, and I am familiar with and ner 605, F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

company has been notified in writing of this change.

or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	ELIZABETH GONZALEZ	15030 SW 43RD TERRACE	
		MIAMI, FL 33185	■Remove
			□Change
			□ Add
			□Remove
			SECRETAR TALLAR
		r F	Add Section 1
			☐ □ Change
			
			□ Remove
			□Change
			□Add
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			□Remove
			□ Change

			
			
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Tective date, if other than the an effective date is listed, the date mus ote: If the date inserted in this blocument's effective date on the December 1.	date of filing: the specific and cannot be prior to date of filing to be specific and cannot be prior to date of filing to be specificated as a specific and cannot be specificated as a specific and s	(optional) ng or more than 90 days after filing.) Purs ry filing requirements, this date will	uant to 605.020 not be listed a
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record specifies a delayed effective is filed.	e date, but not an effective time, at 12:01	a.m. on the earlier of: (b) The 90th	h day after the
THEV NO	2021		
nted			
m/	Signature of a member or authorized represe		

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