## L2000 153307

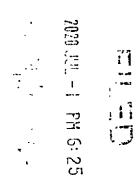
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AUG 1 4 2020 S. YOUNG

## **COVER LETTER**

TO: Regis Divisi	tration Section on of Corporations		
SUBJECT:	'.l.N. FLORIDA L.L.C		
•	Name of I	imited Liability Company	<del></del>
The enclosed A	rticles of Amendment and fee(s) are s	submitted for filing	
	correspondence concerning this matt		
	Ivan Nikulnikov		
		Name of Person	<del></del>
		Firm/Company	
	1500 Black Diamond Dr	apt1510	
		Address	
	Panama city Beach, FL. (	32407	
	(marila 1900)	City/State and Zip Code	
	ivanikul88@gmailcom		
For further inform	nation concerning this matter, please of	(to be used for future annual report notific	cation)
Ivan Nikulnikov		850 7084739	
	Name of Person	at ()	
	ixame of Person	Area Code Daytime T	Telephone Number
Enclosed is a chec	ck 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)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address: Registration Section		Street Address: Registration Section	on.
Division of Corporations		Division of Corporations	
P.O. Box 6327		The Centre of Tallahassee	
Tallahassee, FL 32314		2415 N. Monroe S	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

V.I.N. FLORIDA L.L.C	ಣ
(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears on our records.)  Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000153307</u>	
This amendment is submitted to amend the following:	PH 6: 2
A. If amending name, enter the new name of the limited lial	ات bility company here:
VINI Florida LLC	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1500 Black Diamond Dr.
(Principal office address MUST BE A STREET ADDRESS)	apt 1510
	Panama city beach FL. 32407
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:  Name of New Registered Agent:	address on our records, <u>enter the name of the new registered</u>
New Registered Office Address:	Enter Florida street address
<del></del>	City Zip Code
New Registered Agent's Signature, if changing Registered Agent:	· Zap Couc
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am familiar with and

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>	Address	Type of Action
			🗆 Add
			□Remove
			□Add
			□Remove
			□Change
			🗆 Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: \_ Effective date, if other than the date of filing: (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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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 Dated\_June 29 2020 Signature of a member or authorized representative of a member Ivan Nikulnikov Typed or printed name of signee