# LZO 000 180957

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(Business Entity Name)
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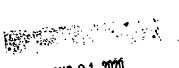
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AUG 21 2000 S. YOUNG

# **COVER LETTER**

TO: Registration Sec Division of Corp				
SUBJECT: <u>VVSV</u>	Name of Limit	rking LL	<u> </u>	
The enclosed Articles of A	amendment and fee(s) are subr	nitted for filing.		
Please return all correspon	dence concerning this matter t	o the following:		
	JAZMÍN	Yesenin- Name of Person	Geni	2,_
	Vision	Hetworka Firm/Company	ling Ll	L-C
	8726 A	egre civ	rcle	£
	_0e1a	City/State and Zip Code	328	36
	Jazmin geav E-mail address: (1	_	ort notification)	<del></del>
For further information co	ncerning this matter, please ca	ili:		
JAZMin Name of	Person GEAV	at ( <u>407</u> )	18093 Daytime Telepho	16 ne Number
Enclosed is a check for the	e following amount:			
□ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclos		\$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

(Name of the Limited Liability Company as it now abpears on our records.)

(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 6/26/2020 and assigned Florida document number 20000 18095?

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 "LLC."

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 registered agent and/or the new registered office address here:

Name of New Registered Agent:		··
New Registered Office Address:		
	Enter Florida street a	ddress
		, Florida
	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 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
M6RM	JAZMIN Y GEAR	8726 Alegre Ci	CLEDELONDO F-E 32836
MGR	JAZMIN Y GEAR JAZMIN Y GEAR	8726 Alegre	circle al F1 32836
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	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)  Want Change Wilt Le
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(If an effective Note: If the	date, if other than the date of filing:
he record sp ord is filed.	ecifies 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	7/08, 2020.
	Signature of a member or authorized representative of a member
	TAZMINT 9 Car. Typed or printed name of signee