L2000231830

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	(Business Entity Name)
	(Document Number)
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	ACCESS, INC.	236 East 6th Avenue. Tallahassee, Florida 32303 D. Box 37066 (32315-7066) ~ (850) 222-2666 or (800) 969-1666. Fax (850) 222-1666 WALK IN		
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	CERTIFIED COPY			
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	VC TOWNHOUSES L			
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•		COVER LETTER	
TO: Registration Se Division of Cor			
	HOUSES LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
	ondence concerning this matter	-	
	Thomas O. Wells, Esq.		
	····	Name of Person	
	Wells & Wells, P.A.		
		Firm/Company	<u>, , , , , , , , , , , , , , , , , , , </u>
	901 Ponce de Leon Blvd.,	Suite 200	
		Address	
	Coral Gables, FL 33134		
		City/State and Zip Code	
	mechelle@twellslaw.com		
Europhistic in Companies of		to be used for future annual report notif	heation)
For further information c	oncerning this matter, please ca	111;	
Thomas O. Wells, Esq.		305 444-0016	e Telephone Number
Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed is a check for th	he following amount:		
■ \$25.00 Filing Fee	S30.00 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)
<u>Mailing Addres</u> Registration 1		<u>Street Address:</u> Registration Sec	stion
Division of C	Corporations	Registration Section Division of Corporations	
P.O. Box 632 Tallahassee, I		The Centre of T	allahassee 2 Street, Suite 810

Tallahassee, FL 32303

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ARTICLES OF A		· ·
TO ARTICLES OF OF		}
OF		1: በቤ
VC TOWNHOUSES LLC	SECREMANY OF S	-TAE
VC TOWNHOUSES LLC (<u>Name of the Limited Liability Company</u> (A Florida Limited Lia	as it now appears on our records;) - bility Company)	· T : ····
The Articles of Organization for this Limited Liability Company w	rere filed on 08/03/2020	and assigned
Florida document number L20000231830		-
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ty company here:	
VC Le Jeune, LLC.		
The new name must be distinguishable and contain the words "Limited Liability	Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		·
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>	·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office ad	dress on our records, <u>enter the</u>	name of the new registered
agent and/or the new registered office address here:		
Name of New Registered Agent:		· <u></u>
New Registered Office Address:		
	Enter Florida street address	

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 mercly reflect a change in the registered office address. I hereby confirm that the limited liability company has been notified in writing of this change.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida _

Zip Code

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

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<u>Title</u>	Name	Address	Type of Action
			□Add
			□Change
			🗆 Add
			⊇Remove
			□Change
			□Add
		<u></u>	DChange
	<u> </u>		□Add
		. <u></u>	
			□Change
<u> </u>		<u> </u>	🗆 Add
			JChange

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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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 record is filed.

January 28	2022
SK.	Signature of a member or authorized representative of a member
Thomas Ö. W	ells, authorized representative

Typed or printed name of signee