Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : SUNBIZ ONLINE LLC Account Number : I20210000128

Phone : (305)244-9500 Fax Number : (954)827-9354

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

# LLC AMND/RESTATE/CORRECT OR M/MG RESIGN 10MINDS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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Helps ... TS

GOT 2 8 2023

## **COVER LETTER**

TO: Registration Section

Division of Cor	porations			
		10MINDS, LLC		
SUBJECT:	Name of Lim	ited Liability Company		
	Amendment and fee(s) are sub			
		RODRIGO URBINA		
		Name of Person		
		SUNBIZ ONLINE LLC		
		Firm/Company		
	1401 SAWGRASS CORPORATE PKWY, SUITE 200			
		Address	<del></del>	
SUNRISE, FL 33323				
	DC)	City/State and Zip Code	ND.C	
		DRIGO@SUNBIZONLIN.C to be used for future annual repo		
For further information c	oncerning this matter, please c	all:		
ROD	RIGO URBINA	305	244-9500	
Name o	f Person	Area Code I	Daytime Telephone Number	
Enclosed is a check for t	he following amount:			
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)	
Mailing Address Registration of C P.O. Box 632	Section Corporations	The Centre	on Section f Corporations e of Tallahassee	
Tallahassee,	FL 32314	2415 N. M	Ionroe Street, Suite 810	

Tallahassee, FL 32303

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	VDS, LLC		
(Nauxe of the Limited Liability Cor (A Florida Limit	npany as it now appears o ed Liability Company)	n our records.)	
he Articles of Organization for this Limited Liability Compa- lorida document number	any were filed on	10/08/2020	and assigned
his amendment is submitted to amend the following:			
. If amending name, enter the new name of the limited l	iability company here	:	
he new name must be distinguishable and contain the words "Limited L	iability Company," the desi	gnation "LLC" or the abbi	reviation "L.L.C."
nter new principal offices address, if applicable:	1401 SAWGRASS CORPORATE PKWY		
Principal office address MUST BE A STREET ADDRESS	')	SUITE 200	Ť.
THE PUR OFFICE HUMIESS MEET DE 1. STREET TO THE		SUNRISE, FL 33323	
was was malking adducer if applicable.		3225 N. HIATUS RD	· ·
inter new malling address, if applicable:	. الشاعد	UNIT 451422	63
Mailing address MAY BE A POST OFFICE BOX)		SUNRISE, FL 33345	
. If amending the registered agent and/or registered officent and/or the new registered office address here:  Name of New Registered Agent:		ords, <u>enter the name</u> ONLINE LLC	of the new regi
	2165 VAN BUREN ST, SUITE 911		
New Registered Office Address:	Enter Florida street address		
	HOLLYWOOD	, Florida	33020
And the second s	C)tr.		Zıp 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 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>	Name	Address	Type of Action
			□Add
			□ Remove
			Change
			□Add
			Remove
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m effective o ote: If the	te, if other than the date of filing:	
record spec is filed.	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	the
ated	OCTOBER 25 2023	
	Signature of a member or authorized representative of a member	

Filing Fee: \$25.00