## LZ0000358158

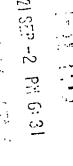
(Re	questor's Name)	
(Ad	dress)	
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(Cit	y/State/Zip/Phone	<del>≥</del> #)
PICK-UP	WAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	· · · · · · · · · · · · · · · · · · ·
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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D. BRUCE SEP 14 2021

## **COVER LETTER**

TO: Regi Divis	stration Sect	ion orations		:			
SUBJECT: _	VMC CON:	SULTING LLC					
SUBJECT:		Name of Lim	ited Liability Company				
		mendment and fee(s) are sub	_				
Please return a	all correspond	dence concerning this matter	to the following:				
		VINCENT M. CASTELL.	ANO JR				
			Name of Person				
		VMC CONSULTING LLC	o e				
			Firm/Company				
		101 E CAMINO REALA	РТ 1105				
			Address				
		BOCA RATON, FLORIDA	A 33432				
		SALES@VMCCONSULT	City/State and Zip Code ING.ORG			20	
		E-mail address; (	to be used for future annual	report notification	)	2021 SEF	· ;
For further inf	formation cor	cerning this matter, please c	all:			<b>一</b> 第	
VINCENT C	ASTELLAN		631 30 at ( )	00-6971			, ues 1 <sup>1</sup>
	Name of F	Person	Area Code	Daytime Telepl	none Number	PH 6:31	,ex
Enclosed is a	check for the	following amount:				ţ.· ·	
<b>≡</b> \$25.00 Fi	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee Certified Copy (additional copy is end		S60.00 Filing Certificate of Certified Co (additional cop	of Status &	
<u>Maili</u>	ing Address:		Street A	ddress:			

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

VMC CONSULTING LLC		
(Name of the Limited Liability Company as it now appe (A Florida Limited Liability Company	rars on our records.)	
The Articles of Organization for this Limited Liability Company were filed on  L20000358158	8/30/2021.	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liability company	here:	
he new name must be distinguishable and contain the words "Limited Liability Company," the	e designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		. <u>-</u> .
Principal office address MUST BE A STREET ADDRESS)		
Inter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office address on our	records, enter the na	ame of the new regist
gent and/or the new registered office address here:		- <del> </del>
Name of New Registered Agent:		70, 1
New Registered Office Address:		5 6 7
	lorida street address	1.
	, 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 Changing Registered Agent, Sig	nature 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
MGR	ROBERT MCCARTHY	1217 W ROYAL PALM RD BOCA RATON, FL 3348	8¢ _ □Add
			_ <b>=</b> Remove
			_ □Change
			_ 🗆 Add
		<del></del>	_ □Remove
			_ □Change
			_ □Add
			_ □Remove
			_ □Change
			_ □Add
			Emove  Change  Change
			on ⇔ _ □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: \_\_\_\_\_\_ (optional) (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 kb) 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 record is filed. AUGUST 30TH 2021 Dated\_ Signature of a member or authorized representative of a member VINCENT CASTELLANO Typed or printed name of signee

ETT E COLOR