Division of Corporations

5/5/2021

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Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : MARTIN ACCOUNTING & TAX SERVICE, INC

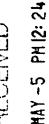
Account Number : I20060000012

Phone

: (305)826-5886

Fax Number

: (305)722-0535



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

mail Address	:		
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VC INTERNATIONAL SERVICES, LLC

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

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Corporate Filing Menu

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ARTICLES OF AMENDMENT TO: f ARTICLES OF ORGANIZATION OF

VC IN	TERNATIONAL SERVICES LLC		
(Name of the Limi	cd Liability Company as It now appears (A Florida Limited Liability Company)	s on our records.)	
The Articles of Organization for this Limited L	iability Company were filed on	12/01/2020	and assigned
Florida document number	- 		
This amendment is submitted to amend the foll	owing:		
A. If amending name, <u>enter the new name o</u>			2021 2021
The new name must be distinguishable and contain the	words "Limited Liability Company," the de	esignation "LLC" or the	ne abbreviation "L.L.C."
Enter new principal offices address, if applic	eable:		
(Principal office address MUST BE A STREE	ET ADDRESS)		
D. J. Mary Mary Mary Mary Mary			E 51
Enter new mailing address, if applicable:		<u> </u>	
(Muiling address MAY BE A POST OFFICE	<u></u>		
B. If amending the registered agent and/or agent and/or the new registered office addre	registered office address on our ress here:	ecords, <u>enter the</u>	name of the new register
Name of New Registered Agent:	VANESSA BAQUERO YARCE		
New Registered Office Address:	1603 NE 2ND AVE APT 303		
New Registered Office Address.	Enter Flor	ida street address	
	MIAMI	, Florida	33132
	City	, 1,0110.	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, 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

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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	RAMOS. CHARLONT	1603 NE 2ND AVE APT 303	🗀 Add
		MIAMI, FL 33132	=Remove
			□ Change
MGR	BAQUERO YARCE, VANESSA	1603 NE 2ND AVE APT 303	<u> </u>
		MIAMI, FL 33132	ORemove—
			□Change
MGR	BONET DE LA CRUZ, MANUEL	1603 NE 2ND AVE APT 303	
		MIAMI, FL 33132	□Remove
			Change
			□ Add
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Effective da	ite, if other than the date	e of filing:			(or	otional)		207.
Note: If the	ate, if other than the date date is listed, the date must be so date inserted in this block to effective date on the Depart	loes not meet the app	licable st	atutory filing	requirements.	this date will	not be listed	l as i
e record spec ord is filed.	cifies a delayed effective dot	e, but not an effective	e time, at	12:01 a.m. o	n the earlier of:	(b) The 90	h day after t	he
	MAY 3RD	2021						
Dated		X Ohaum	4	have				

Typed or printed name of signee