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(Requestor's Name)

(Address)

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(City/State/Zip/Phone #)

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☐ WAIT

☐ MAIL

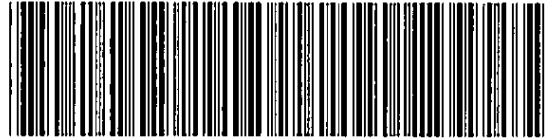
(Business Entity Name)

(Document Number)

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DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

2023 DEC -1 AM 8:49

FILED

A. PARISHANI

JAN 16 2024

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VARGAS & DELAROSA LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

REBECCA VARGAS

Name of Person

VARGAS & DELAROSA LLC

Firm/Company

695 EAGLE POINTE SOUTH

Address

KISSIMMEE FL 34746

VARGASRLLC@GMAIL.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

REBECCA VARGAS

631

565.5887

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee

DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

VARGAS & DELAROSA LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

CLERK OF THE
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

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assigned

The Articles of Organization for this Limited Liability Company were filed on 12/07/2020

Florida document number L20000381331

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VARGAS R LLC

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)

1200 N CENTRAL AVE SUIT 209A

KISSIMMEE FL 34741

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 address

City, **Florida**

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	WINFILD DE LA ROSA	695 EAGLE POINTE SOUTH	<input type="checkbox"/> Add
		KISSIMMEE FL 34746	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
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DEPARTMENT OF STATE
DIVISION OF CORPORATION
TALLAHASSEE, FL 09101

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OFFICE OF THE STATE
DIVISION OF CORPORATION,
TALLAHASSEE, FLORIDA

FILED
2023 DEC -1 AM 8:49
CLERK OF DISTRICT COURT
DIVISION OF CORPORATION,
TALLAHASSEE, FLORIDA

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.

Dated NOV 21 2023

Signature of a member or authorized representative of a member

Rebecca Vargas
Typed or printed name of signee