## 1-21000023751

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## CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

VIVA 5, LLC				
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				Art of Inc. Fife
				LTD Partnership File
				Foreign Corp. File
				L.C. File
				Fictitious Name File
				Trade/Service Mark
				Merger File
				Art, of Amend, File
				RA Resignation
			<del></del>	Dissolution / Withdrawal
				Annual Report / Reinstatement
				Cert. Copy
		•		Photo Copy
			<del></del>	Certificate of Good Standing
				Certificate of Status
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				Corp Record Search
				Officer Search
				Fictitious Search
Signature				Fictitious Owner Search
Ū			<del></del>	Vehicle Search
	- <b>-</b>			Driving Record
Requested by: SETH				UCC 1 or 3 File
Name	Date	Time		UCC 11 Search
· · · · · · · · · · · · · · · · · · ·	Date	THIC		UCC 11 Retrieval
Walk-In	Will Pick Up			Courier

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Viva 5, LLC		
( <u>Name of the Limited Lial</u> (A Flor	pility Company as it now appears on our records.) rida Limited Liability Company)	
The Articles of Organization for this Limited Liability	Company were filed on January 25, 2021	and assigned
lorida document number L21000023751		_
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	cimited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u> )		
3. If amending the registered agent and/or reg	gistered office address on our records, <u>er</u> <u>ddress here</u> :	nter the name of the r
Name of New Registered Agent:		
New Registered Office Address:		7
	Enter Florida street address , <b>Florid</b>	0: 22 0: 22
<u></u>	City	a 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	NATHAN WARD	525 S. Flagler Drive, Suite 201 West Palm Beach, FL 33401	□ Add
			Remove
			Change
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			Remove
			☐ Change
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Effective date, if other than the office of the date must Note:  If an effective date is listed, the date must Note:  If the date inserted in this blo document's effective date on the De	be specific and ca ick does not mee	mnot be prior to o et the applicabl	late of filing or mon	e than 90 days after f	iling ) Pursuant to 605 0207
ne record specifies a delayed The 90th day after the reco	effective dat rd is filed.	e, but not a	n effective tin	ne, at 12:01 a.	m. on the earlier of
	-	2021			
Dated February 22			•		
Dated February 22			ed representative of	a member	

Page 3 of 3

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