## 7/000/11/207

(Red	questor's Name)	
	dress)	
(Aut	ness)	
(Add	dress)	
(Cit)	//State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	ne)
	cument Number)	
(DOC	ument Number)	
Certified Copies	Certificates	of Status
<b></b>	<u> </u>	
Special Instructions to F	Filing Officer:	
•		
<u> </u>		

ffice Use Only

2022 FEB -8 PM 12: 02



300362421363

FEB 15 2072

D CUSHING

## **COVER LETTER**

Registration Section
Division of Corporations

TO:

VBI	P Advertising	and consulting Il	c	
SUBJECT:	Name of Limi	ted Liability Company		
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.		
	spondence concerning this matter			
		EVA ALCAS  Name of Person		
		Name of Person		
	OROPAL	accounting I tax	P.A	
		Firm/Company		
	2671 5. 0	eurse Dr. # 109  Address	)	
	Pompa	no Beach FL .  City/State and Zip Code	33069	
		City/State and Zip Code		<b>202</b> 2
	earias	a oropelpa. com		SEE SEE
	E-mail address:	to be used for future annual report no	inication)	···· · · · · · · · · · · · · · · · · ·
For further information	on concerning this matter, please of	eall:	٠. م م	
ENA	ARIAS	City/State and Zip Code  C Or opel pa. Com  (to be used for future annual report no sall:  at (540) 629.  Area Code Dayti	-3120	
Nar	ne of Person	Area Code Dayti	me Telephone Number [1]	字 21
Enclosed is a check f	or the following amount:			
\$25.00 Filing Fe	e \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Certificate o Certified Co (additional cop	f Status & Py
<u>Mailing Ad</u> Registrati	Idress: on Section	Street Address: Registration S	Section	
Division	of Corporations	Division of C	•	
P.O. Box Tallahass	6327 ee, FL 32314	The Centre of 2415 N. Mon Tallahassee, I	roe Street, Suite 810	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Advertising AND consulting IC MBP (Name of the Limited Liability Company as it now appears on our records,)
(A Florida Limited Liability Company) 03/02/2021 The Articles of Organization for this Limited Liability Company were filed on \_\_\_\_ Florida document number <u>L 2 1 000 111 207</u> This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) 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

## 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.

City

If Changing Registered Agent, Signature of New Registered Agent

, Florida

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	PARTARRIE, VETONICA	12741 Sw 38 kr Miami FL 33175	
		Miami FL 33175	Remove
		□ Change	
			□Add
			□Change
		□Add	
		□Remove	
			Change
		□ Add	
			□Remove
		□Add	
			□Remove
			□ Change
			□Add
			□Remove
			∏ Change

	<i>N</i> /A
	· · · · · · · · · · · · · · · · · · ·
	<u> </u>
	<del></del>
(If an ei <u>Note:</u>	tive date, if other than the date of filing: 2/2/2022 (optional)  fective 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 (in the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the nent's effective date on the Department of State's records.
If the reco	rd 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 iled.
Dated	
	$Q = (h), \dots, h$
	(Ma July 19)
	Signature of a member or authorized representative of a member  ENAPCPA (ENA ARIAS, (PA)

Filing Fee: \$25.00