## L21 CCC 164589

(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(R)	usiness Entity Name)	<u>_</u>
(Bi	usiness Littly Name,	
(Do	ocument Number)	
Certified Copies	Certificates of	Status
Special Instructions to	Filing Officer:	

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Division of Corporations
SUBJECT: VE 5 TOTA CONTROL OF ASS COMMENT OF Limited Liability Company
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:
Kenneth L Fleitwernet
Name of Person
Firm/Company
Firm/Company
30 N. Booth Or Address
Address
Now Consider DE 19720.  City/State and Zip Code
City/State and Zip Code
1 Tout in 10 min 2 to
E-mail address: (to be used for future annual report notification)
, , , , , , , , , , , , , , , , , , ,
For further information concerning this matter, please call:
Name of Person at (302) 665-6657  Name of Person Area Code Daytime Telephone Number
Name of Person Area Code Daytime Telephone Number
,
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Boxed{\subset}\$\$\$\$\$\\$55.00 Filing Fee & \$\Boxed{\subset}\$
Certificate of Status Certified Copy Certificate of Status & Cadditional copy is enclosed) Certified Copy
(additional copy is diclosed)

Mailing Address:

Registration Section

TO:

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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

## ARTICLES OF ORGANIZATION OF

Vanture Out 253, LLC	
(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)	
The Articles of Organization for this Limited Liability Company were filed on 4/19/2021  Florida document numberL21000 / 164589	and assigned
his 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, <u>enter the nate and/or the new registered office address here</u> :	ime of the new register
Name of New Registered Agent:	<u> </u>
New Registered Office Address:	i i i
Enter Florida street address	豆口
Florida	Zip Ca <b>.D</b>
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## 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.

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	Donneth L Flectuage	30 N Booth DR	<i>[</i> Z[Add
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: If the date ir	serted in th	us block do	es not meet the	applicable st	atutory fili	ng requirem	ents, this date will not be lis
ment's effectiv	e date on t	he Departn	ent of State's re	cords.			
	delayed eff	ective date.	but not an effec	ctive time, at	12:01 a.m	on the earli	er of: (b) The 90th day aft
filed.							795
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