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PICK-UP WAIT	MAIL
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COVER LETTER

TO: Registration Sec Division of Corp						
VIRTUAL E	DANCE OPEN AMERICA LLO	•				
SUBJECT:	Name of Linut	cd Liability Company				
	Amendment and forder are cubin	aitted for filing				
	Amendment and fee(s) are subm					
Please return all correspon	ndence concerning this matter t	o the following.				
	DALIRYS VALLADARES	BRITO				
		Name of Person				
	VIRTUAL DANCE OPEN	AMERICA LLC				
		Firm/Company				
	15430 SW 81ST CIRCLE I	ANE				
		Address				
	MIAMI, FL 33 193					
		City/State and Zip Code				
	yiseHtax@yahoo.com					
	E-maii uddress: (1	o be used for future annual rep	ort notification)			
	oncerning this matter, please ca		•••			
DALIRY'S VALLADARES BRITO		305 764-6				
Name o	of Person	at () Area Code	Daytime Telephone Number			
Enclosed is a check for the	he following amount:					
■ \$25.00 Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	S60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)			
Mailing Addre		<u>Street Add</u> Registrati				
Registration Division of C		Registration Section Division of Corporations				
P.O. Box 63.	-	The Cent	re of Tallahassee			

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIRTUAL DANCE OPEN AMERICA LLC		
(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records iability Company)	F)
The Articles of Organization for this Limited Liability Company value document number	were filed on	and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
Boile Grand Prix LLC		
he new name must be distinguishable and contain the words "Limited Liabili	ty 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 a agent and/or the new registered office address here:	iddress on our records, <u>enter</u>	the name of the new registe
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	ZZ,
	, FI	lorida
New Registered Agent's Signature, if changing Registered Agent:	•	
IN INCHIEF OF THE PROPERTY OF		

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>	Name	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
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			08/09/20						
iffective date. f an effective date	if other than the is listed, the date m	ne date of fili oust be specific a	ng: nd cannot be n	rior to date of	filing or mor	e than 90 da	(optional) ys after filing	.) Pursuant to 66	05,020
Note: If the da	e inserted in this ctive date on the	block does not	meet the app	olicable statu	ntory filing	requiremer	its, this date	will not be li	sted a
JOCUMENT S EIT	ctive date on the	Берантенго т	State 3 reco	143		•			
e record specific	s a delayed effect	ive date, but n	ot an effectiv	e time, at 12	2:01 a.m. or	the earlie	of: (b) Th	ne 90th day afi	ter th
rd is filed	ŕ								
August S			2021						
			<u>.</u>		17				
Dated					40				
Dated					11/				
Dated		Signature of	a member or a	uthorized rep	resentative of	f a member			

Filing Fee: \$25.00