L21000200247

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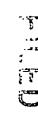
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FLORIDA CAPITAL COURIER SERVICES, INC 2330 CLARE DRIVE TALLAHASSEE, FL 32309 (850) 524-5437 (850) 524-6243

	(OFFICE USE ONLY)
Corporation Name & Document Number, (if	known):
VIP HOSPITALITY GROUP, LLC_	L21000200247
(Business Name) Docu	
_X Walk in	Pick up time
Mail out	Will wait
Photocopy	
Certified Copy	
Certificate of Status	
NEW FILINGS	<u>AMENDMENTS</u>
Profit Not for Profit Limited Liability Domestication Other	X_Amendment Resignation of R.A. Officer/Director Change of Registered Agent Dissolution/Withdrawal Merger
OTHER FILINGS	REGISTERATION/QUALIFICATIONS
Annual Report	Foreign Limited Partnership
Fictitious Name	Reinstatement Trademark
APOSTIL ()	Other
•	EXAMINER'S INITIALS:
	EAAMINER SIMITALS.

COVER LETTER

TO:	Registration Sec Division of Corp			
CHID IE		TALITY GROUP, LLC		
SUBJEC	L1:	Name of Limi	ited Liability Company	
The encl	losed Articles of .	Amendment and fee(s) are sub-	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Raymond Monteleone		
		Name of Limited Liability Company Articles of Amendment and fee(s) are submitted for filing. Articles of Amendment and fee(s) are submitted for filing. Raymond Montelcone Name of Person Paladin Global Partners Firm/Company 612 SE 5th Avenue, STE 6 Address Fort Lauderdale City/State and Zip Code laura@okeesteakhouse com> E-mail address: (to be used for future annual report notification) information concerning this matter, please call: at (
		Paladin Global Partners		crson Cip Code re annual report notification) 653-1071 Code Daytime Telephone Number Ling Fee & S60.00 Filing Fee. Copy Certificate of Status & Certified Copy (additional copy is enclosed) Street Address:
			Firm/Company	 — —·
	VIP HOSPITALITY GROUP. LLC Name of Limited Liability Company e enclosed Articles of Amendment and fee(s) are submitted for filing. asse return all correspondence concerning this matter to the following: Raymond Montelcone Name of Person Paladin Global Partners Firm/Company 612 SE 5th Avenue, STE 6 Address Fort Lauderdate City/State and Zip Code [autra@okcesteakhouse com> E-mail address: (to be used for future annual report notification) r further information concerning this matter, please call: tricia Loomis 954 653-1071 Area Code Daytime Telephone Number closed is a check for the following amount: 5 \$25.00 Filing Fee Certificate of Status Certified Copy (subditional copy is enclosed)			
			Address	- · ·
		Fort Lauderdale		
			City/State and Zip Code	
		E-mail address: (to be used for future annual report not	fication)
For furt	her information c	oncerning this matter, please co	atl:	
Patricia	Loomis		954 653-1071	
	Name o	f Person	Area Code Daytim	ne Telephone Number
Enclose	d is a check for th	ne following amount:		
■ \$25	,00 Fiting Fee		Certified Copy	Certificate of Status & Certified Copy
	Mailing Addres		<u>Street Address:</u> Registration Se	ection

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

Registration Section
Division of Corporations
The Centre of Tallahassee

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810

Tailahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



re filed on April 29, 2021	
	and assigned
y company here:	
Company," the designation "LLC" or the	abbreviation "L.L.C."
	y company here: Company," the designation "LLC" or the a

New Registered Agent's Signature, if changing Registered Agent:

agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

VIP HOSPITALITY GROUP, LLC

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

Enter Florida street address

. 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
AMBR	CRE LEWIS INVESTMENTS LLC	2888 Shawnee Avenue	= Add
		West Palm Beach, FL 33409	□Remove
			Ti-Change
AMBR	M&E INVESTING LLC	13043 53rd Court North	= Add
	·	West Palm Beach, FL 33411	□Remove
			Change
MGR	RALPH LEWIS	2854 Okeechobee Boulevard	
		West Palm Beach, FL 33409	□Remove
			■ Change
MGR	LAURA LEWIS	2854 Okeechobee Boulevard	
		West Palm Beach, FL 33409	
			≡ Change
MGR	MICHAEL JACKSON	3043 53rd Court North	Add
		West Palm Beach, FL 33411	□Remove
			Change
MGR	ERIKA JACKSON	3043 53rd Court North	
		West Palm Beach, FL 33411	□Remove
			= Change

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
AMBR	CURTIS LEWIS	2854 Okeechobee Boulevard	🗀 Add
		West Palm Beach, FL 33409	■Remove
			□Change
			□Add
			□Remove
			☐Add
			□Кспюче
			□Change
			⊖Add
			🗀 Remove
			□Add
			□Remove
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			□Remove
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fective date, if other than the effective date is listed, the date in ote: If the date inserted in this issument's effective date on the	block does not me	et the applicable	ate of filing or more that statutory filing requ	n 90 days after filing irements, this date	.) Pursuant to 605.020 will not be listed as
record specifies a delayed effectis filed.	live date, but not a	n effective time,	at 12:01 a.m. on the	earlier of: (b) T	he 90th day after the
May 24		2021			
	Lateline				
A LATHLES N. A. C.					
Total Control of the	Signature of a mo	ember or authorize	d representative of a m	ember	

Filing Fee: \$25.00