## LZ100023858Z

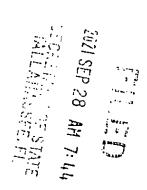
(Requestor's Name)
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(Business Entity Name)
(Document Number)
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## COVER LETTER

TO: Registration 8 Division of Co				
	estments He			•
SUBJECT:	Name of Limit	ed Liability Company		
The enclosed Articles of	f Amendment and fec(s) are subr	nitted for filing.		
	ondence concerning this matter t			
	david lopez londono			
		Name of Person		
		Firm/Company		
	7031 Ergno	Natoral Cli	Site 1	06B
	<u> </u>	City/State and Zip Code		
	E-mail address: (	to be used for future annual	report notification	on)
For further information	concerning this matter, please ca	all:		
david lopez londono		at ( <u> </u>	535787	<u>e</u>
Name	of Person	Area Code	Daytime Tele	phone Number
Enclosed is a check for	the following amount:			
■ \$25,00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee Certified Copy (additional copy is en		☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
<u>Mailing Addi</u> Registration		<u>Street A</u> Registi	aldress: ration Section	n
Division of	Corporations	Divisie	on of Corpora entre of Talla	ations
P.O. Box 6.	521	THE CO	more or raila	ir icrosic C

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

vieval investments lle	
(Name of the Limited	1 Liability Company as it now appears on our record VISEP 28 AH 7: 44  V Florida Limited Liability Company)
The Articles of Organization for this Limited Lia Florida document number L21000238582	bility Company were filed on 05/21/2021 The and assigned
This amendment is submitted to amend the follow	ving:
A. If amending name, enter the new name of t	the limited liability company here:
golocal llc	·
The new name must be distinguishable and contain the wor	rds "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applica	ble:
(Principal office address MUST BE A STREET	'ADDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u></u>
B. If amending the registered agent and/or re agent and/or the new registered office address	gistered office address on our records, <u>enter the name of the new registered</u> ( here:
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	, Florida

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 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
			□Add
			□Change
			□ Add
			□Remove
			☐Change
			□Remove
			Change
			□Add
			Remove
			①Change
			□Remove
			DAdd
			□Remove
			( ) Chenor

D. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	<del></del>
<del></del>	
<del></del>	
_	
(If an effecti Note: If	date, if other than the date of filing:  (optional)  we 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 (3)  the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the 's effective date on the Department of State's records.
f the record s record is filed	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	Geptember 28th, 2021
	Signature of a member or authorized representative of a member
	David Lopez Londono
	The state of the s

Filing Fee: \$25.00



September 2, 2021

DAVID LOPEZ LONDONO 7031 GRAND NATIONAL DR SUITE 106B ORLANDO, FL 32819

SUBJECT: VICVAL INVESTMENTS LLC

Ref. Number: L21000238582

We have received your document and check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned to you for the following reason(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an administratively dissolved/revoked entity. Names of administratively dissolved/revoked entities are not available for one year from the date of administrative dissolution/revocation unless the dissolved/revoked entity provides the Department of State with an affidavit or letter stating that they have no intention of reinstating, therefore, releasing the name for use to another entity.

GO LOCAL LLC-L19000220194

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 621A00021223

Querida R Silas Regulatory Specialist II

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