## L21000253820

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T. MATTHEWS

## **COVER LETTER**

TO: Registration S Division of Co			
	l Service LLC		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
	ondence concerning this matter	-	
	Michael Dempsey		
		Name of Person	· · · · · · ·
	ZenBusiness INC		
		Firm/Company	aytime Telephone Number    \$60.00 Filing Fee,   Certificate of Status & Certified Copy (additional copy is enclosed)   Section   Corporations of Tallahassee
	5511 Parkerest Drive STE	. 103	
		Address	
	Austin, Texas, 78731		
		City/State and Zip Code	
	fulfillment@zenbusiness.ed		· · · · · · · · · · · · · · · · · · ·
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual report not all:	ilication)
Michael Dempsey c/o Z		844 493-6249	
Name	of Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for t	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy
Mailing Addre Registration		<u>Street Address:</u> Registration Se	ection
Division of C	Corporations	Division of Co	rporations
P.O. Box 63. Tallahassee,			Tallahassee oe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 3 1 14 771 3: 19

VIP Rental Service LLC		
( <u>Name of the Limited Liab</u> (A Flor	hility Company as it now appears on our reco rida Limited Liability Company)	<u>rds.</u> )
The Articles of Organization for this Limited Liability Torida document number 1.21000253820	Company were filed on 2021-06-01	and assigned
This amendment is submitted to amend the following:	:	
A. If amending name, enter the new name of the li	imited liability company here:	
he new name must be distinguishable and contain the words "L	imited Liability Company," the designation "L1	.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET AD	DRESS)	
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registe gent and/or the new registered office address here		r the name of the new regist
	-	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
<u> </u>		lorida
	Сиу	Zip Code

## 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
MGR	David Anthony Pereira JR	1510 11th Ave	CJAdd
		Belvidere, IL 61008	_
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			□Remove
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Affective date, if other than the an effective date is listed, the date multiple of the date inserted in this blocument's effective date on the f	ist be specific and can lock does not meet	mot be prior to the the applicable		ore than 90 days af		
record specifies a delayed effecti d is filed.	ve date, but not an	effective time	, at 12:01 a.m.	on the earlier of:	(b) The 90th day	after the
January 11 Dated	2	2022				
/s/ David Anthon						
	Signature of a men	nber or authoriz	ed representative	of a member		

Filing Fee: \$25.00