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T. MATTHEWS

FEB - 8 2022

COVER LETTER

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: Michael Dempsey Name of Person ZenBusiness Inc. Firm/Company 5511 Parkerest Drive Suite 103 Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
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: Michael Dempsey Name of Person ZenBusiness Inc. Firm/Company 5511 Parkerest Drive Suite 10.3 Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
Please return all correspondence concerning this matter to the following: Michael Dempsey Name of Person ZenBusiness Inc. Firm/Company 5511 Parkerest Drive Suite 103 Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
Michael Dempsey Name of Person ZenBusiness Inc. Firm/Company 5511 Parkerest Drive Suite 103 Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
Name of Person ZenBusiness Inc. Firm/Company 5511 Parkerest Drive Suite 103 Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
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5511 Parkerest Drive Suite 103 Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
5511 Parkerest Drive Suite 103 Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
Address Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
Austin, Texas, 78731 City/State and Zip Code fulfillment@zenbusiness.com			
City/State and Zip Code fulfillment@zenbusiness.com			
fulfillment@zenbusiness.com			
E-mail address: (to be used for future annual report notification)			
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: Michael Dempsey Name of Person ZenBusiness Inc. Firm/Company 5511 Parkerest Drive Suite 103 Address Austin, Texas, 78731 City/State and Zip Code			
Michael Dempsey c/o ZenBusiness Inc. 844 493-6249			
Name of Person Area Code Daytime Telephone Number			
Enclosed is a check for the following amount:			
Certificate of Status Certified Copy Certificate of Status (additional copy is enclosed) Certified Copy			

Mailing Address: 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 AMENDMENT TO ARTICLES OF ORGANIZATION OF

22 371 67 711 9: 69

VIP Rental Service LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records Liability Company)	<u>.</u>)
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L21000253820}{L21000253820}$	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 limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	618 E. South street	
Principal office address MUST BE A STREET ADDRESS)	500	
	Orlando , FL 32801	<u> </u>
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter</u>	the name of the new regist
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flo	orida
	City	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 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>	<u>Name</u>	Address	Type of Action
MGR	Vanessa Pereira	1510 11th Ave	= Add
		Betvidere, II. 61008	□Remove
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
<u></u>			□Add
			□Remove
			□Change
			
			□Remove
			□Change
			□Add
			Remove

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Effective date, if other than the date must be fan effective date is listed, the date must be Note: If the date inserted in this block document's effective date on the Department.	e specific and cannot be cooler does not meet the a	ipplicable statuto			
e record specifies a delayed effective d rd is filed.	ate, but not an effect	tive time, at 12:0	l a.m. on the earlie	r of: (b) The 90th d	ay after the
Dated January 21	2022				
Isl Vanossa Poroira					
Si	gnature of a member or	r authorized repres	centative of a member		

Filing Fee: \$25.00