

To:

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2022-06-03 02:24:47 GMT

14076122313

From: Antonio Cardoso

6/2/22, 10:10 PM

Division of Corporations

L21600317690

Florida Department of State

Division of Corporations

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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : YCBI TECHNOLOGY, LLC  
Account Number : 128200000112  
Phone : (407)832-7248  
Fax Number : (407)612-2313

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: ACCOUNTING@EXCELTOTALBUSINESS.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
VIANA VALENCA SERVICES LLC

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2022 JUN -3 AM 11:43  
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JUN - 3 2022

K. Brumbley

**COVER LETTER**

**TO: Registration Section  
Division of Corporations**

**SUBJECT: VIANA VALENCA SERVICES, LLC**

\_\_\_\_\_  
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:

ANTONIO CARDOSO

\_\_\_\_\_  
Name of Person

EXCEL TOTAL BUSINESS

\_\_\_\_\_  
Firm/Company

7065 WESTPOINTE BLVD, SUITE #301

\_\_\_\_\_  
Address

ORLANDO, FL 32835

\_\_\_\_\_  
City/State and Zip Code

ACCOUNTING@EXCELTOTALBUSINESS.COM

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANTONIO CARDOSO

407

351-6656 EXT 102

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**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

VIANA VALENCA SERVICES, LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/12/2021 and assigned  
Florida document number L21000317690.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

N/A

The new name must be distinguishable and contain the words "Limited Liability 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)

AT GABRIEL VALENCA

815 MAIN LANE STE#4217

ORLANDO, FL 32801

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

AT GABRIEL VALENCA

815 MAIN LANE STE#4217

ORLANDO, FL 32801

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

EXCEL TOTAL BUSINESS

New Registered Office Address:

7065 WESTPOINTE BLV SUITE #301

*Enter Florida street address*

ORLANDO

*City*

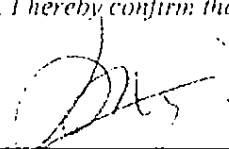
Florida

32835

*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

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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>	<u>Address</u>	<u>Type of Action</u>
N/A			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
N/A			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
N/A			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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N/A			<input type="checkbox"/> Add
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