N21000323118

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COVER LETTER

TO: Registration Section Division of Corporations

VANTABLACK RENOVATIONS LLC

SUBJECT:					
	Name of Lin	nited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for tiling.			
Please return all correspo	ondence concerning this matter	to the following:			
	EDWARD A CLAROS				
Name of Person					
	VANTABLACK RENOVA	ATIONS LLC			
	12536 BOGGY POINTE 1	Firm/Company DR			
	ORLANDO, FL 32824	Address			
	EDWARD A CLAROS	City/State and Zip Code			
	E-mail address: (to be used for future annual report notif	ication)		
	oncerning this matter, please c	all:	57		
EDWARD A CLAROS		305 713-7180			
Name o	f Person	at () Area Code Daytime	Telephone Number		
Enclosed is a check for the	ne following amount:				
E \$25.00 Filing Fee	S30.00 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

VANTABLACK RENOVATIONS 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 and assigned 1.21000323118 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC" Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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: New Registered Office Address:

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.

City

Enter Florida street address

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>	Type of Action
MGR	JAIME A OCHOA	12536 BOGGY POINTE DR	/
			ZAdd
		ORLANDO, FL 32824	
			□Remove
MGR	MARTHA L MEJIA	12536 BOGGY POINTE DR	
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		ORLANDO, FL 32824	
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fective date, if other the neffective date is listed, the ote: If the date inserted incument's effective date of	date must be specific a n this block does not	ind cannot be prior t meet the applic	able statutory filir	(opt i nore than 90 days afte ng requirements, th	r filing.) Pursi	uant to 605.02 not be listed :
	effective date, but n	iot an effective ti	me, at 12:01 a.m.	on the earlier of: (l	o) The 90th	i day after th
ecord specifies a delayed is filed. ted <u>Jecem b</u>		2022 full	orized representative			