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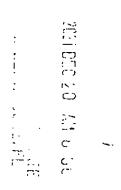
(Requ	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to Fi	ling Officer:	

Office Use Only



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COVER LETTER

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TO:

Registration Section

Tallahassee, FL 32314

Division of Cor	porations		¥
ESTETICA	& BRONZE VAL PAIVA LI	.C	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	JULIANA D SANTOS		
		Name of Person	
	UNIVERSAL TAX AND	INSURANCE CORP	
		Firm Company	
	4081 NORTH FEDERAL	HWY SUITE 120	
		Address	
	POMPANO BEAC, FL 33	064	
		City/State and Zip Code	
	julianadsuniversal@gmail.c		
		to be used for future annual report noti	fication)
For further information of	oncerning this matter, please e	all:	
JULIANA D SANTOS		954 532-9000 at ()	
Name of Person		Area Code Daytim	ne Telephone Number
Enclosed is a check for the	ne 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 (Division of C	Section Corporations	Street Address: Registration Se Division of Cor	porations
P.O. Box 632	.7	The Centre of T	Fallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 DEC 20 11 11 11

ESTETICA & REONIZE VAL BANKALI C

(Name of the Limited Liability Company as it now appears on our re (A Florida Limited Liability Company)	ecords.)			
(A Florida Limited Liability Company)	ĩ F			
	· [
The Articles of Organization for this Limited Liability Company were filed on $\frac{08/17/2021}{\text{Elorida document number}}$.	and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability company here:				
VP CONSTRUCTION ENTERPRISE LLC				
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: 601 NORTH FEDERAL F	601 NORTH FEDERAL HWY SUITE 417			
(Principal office address MUST BE A STREET ADDRESS) POMPANO BEACH, FL.	S) POMPANO BEACH, FL 33064			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) POMPANO BEACH, FL.				
B. If amending the registered agent and/or registered office address on our records, <u>eragent and/or the new registered office address here</u> :	nter the name of the new regist			
Name of New Registered Agent:				
New Registered Office Address: Emer Florida street a	ddress			
	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
			□Remove
			□Change
			□Add
			□Remove
		.	
			□Add
			□Remove
			□Change
			□Remove
			Change
			□Add
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			□Change
			□Remove
			— Champa

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-		<u> </u>		•			
							
							
							
	<u> </u>						
Effective date, i	f other than the da s listed, the date must b	ite of filing:	12/01/2021			(optional)	
Note: If the date	inserted in this block	k does not me	et the applicat	date of filing or le-statutory fil	more man 90 ing requiren	days after filing. nents, this date	will not be listed t
document's effec	tive date on the Depa	artment of Sta	ite's records.				
e record specifies	a delayed effective o	lare but not a	n effective tim	e at Pr01 a n	ı on the earl	ier of: (b) Th	e 90th day after th
rd is filed.						(,	
DECEMB	1; R		2021				
Dated	ER I	•		<u>.</u> ·			
<u></u>							

Filing Fee: \$25.00