L21000378322

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City	/State/Zip/Phon	e #)
PICK-UP	MAIT	MAIL
(Bus	iness Entity Na	me)
(Doc	ument Number))
Certified Copies	Certificate	s of Status
Special Instructions to F	iling Officer:	

Office Use Only



100399113901

12/19/22--01023--014 **25.00

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vio Contracting LLC		
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our record d Liability Company)	<u>is.</u>)
he Articles of Organization for this Limited Liability Compar	ny were filed on 08-24-2021	and assigned
lorida document number 1.21000378322		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited lia	ability company here:	
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC	" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
		,
		-
Inter new mailing address, if applicable:		·
Mailing address MAY BE A POST OFFICE BOX)		· .
		• •
 If amending the registered agent and/or registered office gent and/or the new registered office address here: 	e address on our records, <u>enter</u>	the name of the new regi
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street addres	5.5
	ក	la mida
	, ru	oridaZip 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
AMBR	Ronald Anthony Farrell	670 NE 173RD TER	⊒ Add
		Miami, FL 33162	_
			□Change
AMBR Marie Violene Villier	Marie Violene Villier	670 NE 173RD TER	□Add
		Miami, FL 33162	■Remove
n			
			⊡Remove
			□Remove
		Change	
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			☐ Change
			□Add
			Remove
			□Change

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Tective date, if other than the date an effective date is listed, the date must be ote: If the date inserted in this block ocument's effective date on the Depart	specific and cannot be prior to dated the specific and cannot be specificable.	(option of filing or more than 90 days after statutory filing requirements, this	onal) filing.) Pursuant to 605.020 s date will not be listed a
record specifies a delayed effective datis is filed.	ate, but not an effective time,	at 12:01 a.m. on the earlier of: (b) The 90th day after the
	2022		
nted			
/s/ Ronald Anthony Farre	·		