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COVER LETTER

TO:

	legistration Se Division of Co			
SUBJECT	VOG SS, I	LC		
SOBJEC	·	Name of Lin	nited Liability Company	
The enclos	sed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
		ondence concerning this matter		
		Ronny Peltes		
			Name of Person	
		VOG SS. LLC		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		1499 SW 30th Ave., #16		
			Address	
		Boynton Beach, FL 33426		
			City/State and Zip Code	
		office@mackindustrial.com	1	
		E-mail address: (to be used for future annual report not	ification)
For further	information e	oncerning this matter, please c	all:	
Ronny Pel	tes		561 738-7576 at ()	
	Name o	f Petson	Area Code Daytin	ne Telephone Number
Enclosed is	s a check for th	ne following amount:		
■ \$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)
	lailing Addres		Street Address:	
Registration Section Division of Corporations		Registration Section Division of Corporations		
	O. Box 632		The Centre of 7	•
Т	allahassee, I	FL 32314		e Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VOG SS, 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 September 1, 2021 and assigned Florida document number 1.21000390740 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 "L.L.C." 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: Enter Florida street 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

, Florida _

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>	Name	Address	Type of Action
MGR	David Mackey	·	□Add
			≣Remove
			□Change
MGR	Steve Mackey	-	
			■Remove
			□ Change
MGR	VOG Village Park, LLC	1499 SW 30th Ave., #16 Boynton Beach 33426	⊒ Add
			□Remove
			C C ⊜ge
			SSEE FLE
			PR P
			□Change
			□Add
			□Remove
			□Change
			□Add
		·	□Remove
			[]Change

	
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(If an effective	te, if other than the date of filing:(optional) ate is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.020 date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a
	ffective date on the Department of State's records.
he record spo ord is filed.	fies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
	() 01 1 1 (20)
Dated	Systember 1. 2021.
	d()~
	Signable of a member or authorized representative of a member
•	O D

Filing Fee: \$25.00