Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : PRONTO TAX & ACCOUNTING SERVICES, INC

Account Number : I20090000095 Phone : (305)267-1092

Fax Number : (305)267-2819

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

#### LLC AMND/RESTATE/CORRECT OR M/MG RESIGN GOLDEN VICTORY LLC

Certificate of Status	0
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K. SALY

### H230003871163

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



GOLDEN VICTORY LLC	The FLORI
(Name of the Limited Liability Company as i	t now appears on our records.) y Company)
The Articles of Organization for this Limited Liability Company were Florida document number L21000392380	filed on 08/30/2021 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability co	ompany here:
The new name must be distinguishable and contain the words "Limited Liability Cor	npany," 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)	
<del></del>	
B. If amending the registered agent and/or registered office addres agent and/or the new registered office address here:	s on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florido street address

#### New Rogistered 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.

Clly

If Changing Registered Agent, Signature of New Registered Agent

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## H230003871163

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
MGR	SANDRA FRANCO VILLASMIL	9619 W 32 LN	
		HIALEAH, FL 33018	
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ecord specifies a delayed	effective date, buyep	an effective time, at	12:01 a.m. on the earlie	er of: (b) The 90th day	after the
is filed.	///	1			
, NOVEMBER 7	.{ \!	2023			
ited	<del></del>				
		<i>†</i> 1			

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