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.

(((H21000438585 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : RC TAX SERVICE LLC

Account Number : I20148808083 : (407)932-0040 Fax Number : (407)520-5473

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

Email Address:

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VGC PROJECTS LLC

Certificate of Status	0
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S. PRATHER

12/01/2021 1:47: From: 4079428946 DIEGO BORRERO

## **COVER LETTER**

Page: 3/6

TO:	Registration Se Division of Cor				
VGC PROJECTS LLC					
SUBJECT: Name of Limited Liability Company					
The enc	losed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please re	eturn all correspo	ondence concerning this matter	to the following:		
		DIEGO F, GARCIA BOR	RERO		
			Name of Person		,
		VGC PROJECTS LLC			
			Firm/Company		
	3500 SAGAMORE LANE				
	Address				
		KISSIMMEF, FL 34741			
			City/State and Zip Code	·····	
		DFGARCIA1979@OUTLO			
			to be used for future annual	report notification)	
For furth	er information c	oncerning this matter, please c	all:		
DIEGO	F, GARCIA BO	RRERO	407 473 at ( )	31123	
	Name o	f Person	Area Code	Daytime Telephone Number	
Enclosed	d is a check for th	ne following amount:			
篇 \$25.	00 Filing Fee	S30.00 Filing Fee & Certificate of Status	S\$5.00 Filing Fee & Certified Copy (additional copy is one	Certificat losed) Certified	e of Status &
	Mailing Addres Registration S Division of C	Section orporations	Street Ad Registra Division	ddress: ation Section of Corporations	

P.O. Box 6327 Tallahassee, FL 32314

The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

12/01/2021 1:47:

From: 4079428946 DIEGO BORRERO ARTICLES OF AMENDMENT

Page: 4/6

T	0		
ARTICLES OF (	ORGANIZATION		
O	)F		
VGC PROJECTS LLC		925 L	T]
(Name of the Limited Limitity Comps (A Florida Limited	ony as it now appears on our records.) Liability Company)	ლ° _   ლ≺ —	ר וד כ
The Articles of Organization for this Limited Liability Company	were filed on 11/15/2021	ased assigned	
Florida document number L21000490956		: 46 RIDA	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited llab	ility company here:		
1			
The new name must be distinguishable and contain the words "Limited Liabil	lity 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 a agent and/or the new registered office address here:	iddress on our records, <u>enter the</u>	name of the new register	<u>:d</u>
Egent anotor the new registered office audress here:			
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
	, Florid	<b>a</b>	
	City	Zip 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.

12/01/2021 1:47: From: 4079428946 DIEGO BORRERO Page: 5/6
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

Title	Name	Address	Type of Action
AMBR	Camerano Perez, Adriana E	3500 SAGAMORE LANE KISSIMMEE, FL 34741	🗆 Add
			□Remove
			<b>=</b> Change
			DAdd
			□Remove
		•	Change
			□Add
			CRemove
			Change
			🗆 Add
			_ CRemove
	•		Change
			_ □Add
			□Remove
			_ Change
		· · · · · · · · · · · · · · · · · · ·	_ □Add
			Remove
			<b>Псы</b>

O. 11 amending any other information	on, enter change(s) here: (Attach additional she	ets, if necessary.)
	· · · · · · · · · · · · · · · · · · ·	
. Effective date, if other than the d	ite of filing:	(optional)
(If an effective date is listed, the date must be Note: If the date inserted in this bloc document's effective date on the Dep	e specific and cannot be prior to date of filing or more than 9 c does not meet the applicable statutory filing require artment of State's records.	10 days after filing.) Pursuant to 605.0207 (3)(b) ements, this date will not be listed as the
the record specifies a delayed effective of the record is filed.	ate, but not an effective time, at 12:01 a.m. on the ea	urlier of: (b) The 90th day after the
DECEMBER 01	2021	2021 TÄLL
Dated	· · · · · · · · · · · · · · · · · · ·	2021 DEC - SEURICHASSE ALLAHASSE
<u></u>	han F. Garcia Boon	uper [17]
(C) 200 A	C Course B = 2	<del></del>
<u>D:05.0</u>	C. Coccici Bone, of Typed or printed name of signec	3: 46 STATE ORIDA