121000531889

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PICK-UP WAIT MAIL
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CECRETARY OF STATE
TALLAHASSEE, FL

A. BUTLER MAY 13 2022

COVER LETTER

TO: Registration S Division of Co			
	perties LLC		
SUBJECT:	Name of Lin	nited Liability Company	
fred a second of the second		N 15 60	
	f Amendment and fee(s) are sub	_	
Please return all corresp	ondence concerning this matter	to the following:	
	steven woodward		
		Name of Person	
	Vidar properties LLC		
		Firm/Company	
	6049 se 121st lane		
		Address	· - · · · · ·
	Belleview, Fla 34420		
		City/State and Zip Code	
	sweyn1234567@gmail.coπ	to be used for future annual report no	tituation)
For further information of	concerning this matter, please c	•	uncation
Ann woodward	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	814 790-2564	
Name o	of Person	at ()	me Telephone Number
		/.	
Enclosed is a check for t	he 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 Addres Registration		Street Address: Registration Se	ection

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

VIDIAR PC	openties	: LLC	2022 MAY 13 AM 10: 55
VIDIAR PC (Name of the Lim	ited Liability Compa (A Florida Limited I	ny as it now appears on our r Liability Company)	esorge CRETARY OF STATE TALLAHASSEE, FL
The Articles of Organization for this Limited I	_iability Company	were filed on 12-27-2021	and assigned
Florida document number L21000531889	·		
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
Vidar Properties & Construction LLC			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	N/A	
(Principal office address MUST BE A STRE			
Enter new mailing address, if applicable:		N/A	
(Mailing address MAY BE A POST OFFICE	BOX)	 	
B. If amending the registered agent and/or agent and/or the new registered office address.		address on our records, <u>e</u>	nter the name of the new registere
Name of New Registered Agent:	N/A		
New Registered Office Address:		For Florida	71
		Enter Florida street o	aarens
			, Florida
		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.

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

Title	Name	Address	Type of Action
mgr	Khalid Mike Hymore	2117 Aitkin Loop , Leesburg, florida 34748	
			□Remove
		 	□Change
ingr Steven A Woodward	Steven A Woodward	6049 sc 121st lane Belleview , Florida 34420	🗒 Add
			[]Remove
			□Change
			🗀 Add
		- 	□Remove
		· 	□ Change
		·	□Add
			Change
			□Add
			□Remove
			Change
			□Add
			□Remove
			□Change

	ny other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
	
	
f an effective date Note: If the date	if other than the date of filing:
record specific d is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	th 2022
-	Signature of a member or authorized representative of a member
Stev	e Woodward
	Typed or printed name of signee

Filing Fee: \$25.00