

122 000004747

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

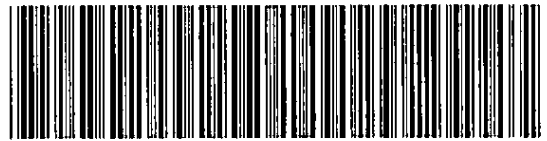
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only

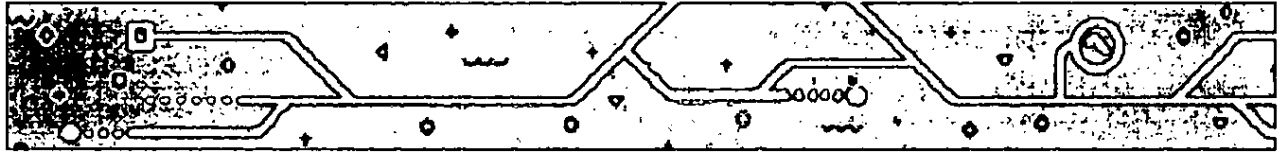


800380536928

22 FEB 2 PM 3:30

T. MATTHEWS

FEB -7 2022



zenbusiness

Jan 18, 2022

Florida Secretary of State
Division of Corporations
2415 N Monroe St Suite 810
Tallahassee, FL 32303

RE: **Atm & vending solutions LLC**

To Whom It May Concern:

Attached please find the executed **ARTICLES OF AMENDMENT** for the above referenced. Please review and file the attached document on a routine basis. Please note that this document is signed with a conformed signature.

Once completed please forward the filed confirmation or notification to the address listed below:

ZenBusiness Inc
Attention: Jenny Countz
5511 Parkercrest Dr., Suite 103
Austin TX 78731

If you have any questions, please feel free to contact me at 844-493-6249 or at fulfillment@zenbusiness.com.

Thank you.

Jenny Countz
ZenBusiness Customer Success

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Atm & vending solutions LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jenny Countz

Name of Person

ZenBusiness Inc.

Firm/Company

5511 Parkerest Drive, Suite 103

Address

Austin, TX 78731

City/State and Zip Code

fulfillment@zenbusiness.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jenny Countz

844 493-6249

at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 Address:

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

Street Address:

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

22 JUL 2021 PM 3:30

Atm & vending solutions 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 12/27/2021 and assigned Florida document number 1.22000004747.

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:

5342 Clark rd

(Principal office address MUST BE A STREET ADDRESS)

#1090

Sarasota, FL 34233

Enter new mailing address, if applicable:

5342 Clark rd

(Mailing address MAY BE A POST OFFICE BOX)

#1090

Sarasota, FL 34233

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

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

