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(Req	uestor's Name)	
(Addı	ress)	·
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(City/	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nar	me)
(Doc	ument Number)	
Certified Copies	Certificates	s of Status
Special Instructions to Fi	iling Officer:	
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A. BUTLER APR 0.7 2022

COVER LETTER

Registration Section

TO:

Division of Cor	porations		-		
	R FUNDING, LLC (87-43451	35)			
SUBJECT:	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	MARGARET DALEY				
		Name of Person			
	VEGASTAR FUNDING,	LLC			
		Firm/Company			
	4521 PGA BLVD PMB18	7			
	1,40.0	Address			
	PALM BEACH GARDEN	IS, FLORIDA 33418			
	•	City/State and Zip Code			
	Mdaley@vegastarfunding.c	om to be used for future annual report not	(Castler)		
For further information c	oncerning this matter, please c		meation		
MARGARET DALEY		561 707-1444 at ()			
Name o	f Person	Area Code Daytin	ne Telephone Number		
Enclosed is a check for the	ne following amount:				
□ \$25.00 Filing Fee	■ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Mailing Address Registration S	Section	<u>Street Address:</u> Registration Sc			
Division of Corporations P.O. Box 6327		Division of Corporations The Centre of Tallahassee			
Tallahassee, I		2415 N. Monroe Street. Suite 810			

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

VEGASTAR FUNDING, LLC (87-4345135)

2022 MAR 23 AM 9: 37

(<u>Name of the Limi</u>	(A Florida Limited	Liability Company)	TALLAHASSEE, FL	
The Articles of Organization for this Limited L	iability Company	were filed on $\frac{01/10/20}{}$	22 and assigned	
lorida document number L22000010064	·			
his amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name o	of the limited liab	oility company here:		
VA				
he new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designa	tion "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:		4521 PGA BLVD PMB 187		
Principal office address MUST BE A STREET ADDRESS)		PALM BEACH GARDENS		
		FLORIDA 33418		
Inter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)		4521 PGA BLVD PM	B 187	
		PALM BEACH GARDENS		
		FLORIDA 33418		
3. If amending the registered agent and/or gent and/or the new registered office address Name of New Registered Agent:		address on our record	s, enter the name of the new registe	
New Registered Office Address:	N/A			
	Enter Florida street address			
	N/A		, Florida	
		City	Zip Code	
iew Registered Agent's Signature, if changing		-		
hereby accept the appointment as register or provisions of all statutes relative to the prop	per and complete	performance of my d		

N/A

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

<u>Title</u>	Name	Address	Type of Action
AMBR	MARGARET DALEY (100%)	4521 PGA BLVD PMB 187	□Add
		PALM BEACH GARDENS, FLORIDA 33418	□ Remove
			■Change
MGR	CARRIE HILL (0%)	4521 PGA BLVD PMB 187	= Add
		PALM BEACH GARDENS, FLORIDA 33418	□Remove
			□Change
AMBR	RICHARD VEGA (0%)	4325 JOHNSON DAIRY RD #175	□Add
		PALM BEACH GARDENS, FL 33410	Remove
			□Change
			🗀 Add
			□Remove
			□Change
			Remove
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			□Remove
			□Change

Page 2 of 3

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ective da	ate, if other than the date	of filing:	ST 2022	(0	ptional)	
effective	date is listed, the date must be sp	ecific and cannot be pr		or more than 90 days a	after filing.) Pursuant to	
	date inserted in this block de effective date on the Departu			ining requirements,	this date will not be	nsicu a
	specifies a delayed effe		not an effectiv	e time, at 12:0	1 a.m. on the ea	arlier d
ne 90tř	n day after the record is	i filed.				
	MARCY 14	2022)			
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		MX	To bollow	1		
_	Signa	ure of a member of at	dunt ed representa	tive of a member		-
			GARET DA	- -		

Page 3 of 3

Filing Fee: \$25.00