

3-10-22, 8:45 AM

Division of Corporations

W200016665
 Florida Department of State
 Division of Corporations
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To: Division of Corporations
 Fax Number : (850)617-6383

From: Account Name : BURNS LAW OFFICES, P.A.
 Account Number : I20140000036
 Phone : (305)733-8223
 Fax Number : (866)883-7019

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

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2022 MAR 10 PM 3:26

DEPARTMENT OF STATE
 TALLAHASSEE, FLORIDA
 2022 MAR 10 PM 12:48

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**LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
 VIRVAN, EDUYUB, & COMPANY LLC**

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Corporate Filing Menu

T. LEMIEUX
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MAR 11 2022

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

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VIRVAN, EDUYUB, & COMPANY 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 01/07/2022 and assigned Florida document number L22000016665

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:

(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 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

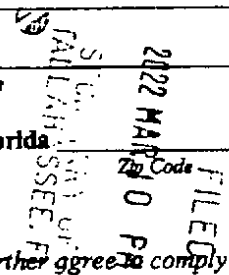
City

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

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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>	<u>Address</u>	<u>Type of Action</u>
MGR	MARK M. GOLDSTEIN	1190 NW 100TH WAY	<input checked="" type="checkbox"/> Add
		PLANTATION, FL 33322	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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