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| PICK-UP WAIT MAIL                       |
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| (Element Links, Value)                  |
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| Certified Copies Certificates of Status |
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| Special Instructions to Filing Officer: |
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1022 FEB 28 PM 2: 00 SECRETARY OF STATE TALLAHASSEFT FI

A. BUTLER MAR - 9 2022

## **COVER LETTER**

| TO: Registration Set Division of Co. |                                  |  |  |
|--------------------------------------|----------------------------------|--|--|
| SUBJECT:                             | Vardie-Pro C<br>Name of Lin      | leaning Lic .  |  |
|                                      | Name of Lin                      | ited Liability Company   |  |
| The enclosed Articles of             | Amendment and fee(s) are sub     | unitted for filing   |  |
|                                      |                                  |  |  |
| Please return all correspondence     | ondence concerning this matter   | to the following:  |  |
|                                      | <u> Yan</u>                      | die Concepcion   | <del></del>  |
|                                      |                                  | Name of Person   |  |
|                                      |                                  | Firm/Company   |  |
|                                      | C.110                            | , ,  |  |
|                                      | 9011 E                           | Elliot Gr<br>Address   |  |
|                                      | Tan                              | 200 A 321115   |  |
|                                      |                                  | City/State and Zip Code  |  |
|                                      | donista                          |  |  |
|                                      | E-mail address: (                | City/State and Zip Code  101584 @ 1000d. Com to be used for future annual report notification) |  |
| For further information of           | concerning this matter, please c | all:   |  |
| Mardie                               | (musician                        | at (813) (106-200) Area Code Davtime Telephone   | 19   |
| Name o                               | of Person                        | Area Code Daytime Telephone  | e Number   |
| Enclosed is a check for t            | he following amount:             |  |  |
| \$25.00 Filing Fee                   | ☐ \$30.00 Filing Fee &           | ☐ \$55.00 Filing Fee & ☐ \$  | 60.00 Filing Fee,  |
| 15 325.00 Fining Fee                 | Certificate of Status            | Certified Copy (additional copy is enclosed)   | Certificate of Status & Certified Copy (additional copy is enclosed) |
|                                      |                                  |  |  |
| Mailing Addre                        |                                  | Street Address:  |  |
| Registration                         |                                  | Registration Section   |  |
| Division of C                        | -                                | Division of Corporation:   |  |
| P.O. Box 632                         |                                  | The Centre of Tallahasso 2415 N. Monroe Street.  |  |

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

|  | SECRETARY OF STATE  |
|--|---|
| (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on   | ir records.)  |
| The Articles of Organization for this Limited Liability Company were filed on  | SECRETARY OF STATE  |
| The Articles of Organization for this Limited Liability Company were filed on  | アトマントンはは、アンドンは、アンドン・アントン・アントン   |
| Florida document number 220007070155.  | and assigned  |
|  |   |
| 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 designati  | on "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)   |   |
|  | <del></del>   |
|  |   |
| B. If amending the registered agent and/or registered office address on our records agent and/or the new <u>registered office address here</u> :                           | , enter the name of the new register  |
| agent andros the new registered office address neve.   | i   |
| Name of New Registered Agent:  |   |
| Name of New Registered Agent.  |   |
| New Registered Office Address:  Enter Florida stree  | at addrass  |
| 1.mer 1 arad sires   | er tata ess   |
|  | , Florida   |
| City   | z.p c oae   |
| New Registered Agent's Signature, if changing Registered Agent:  |   |
| I hereby accept the appointment as registered agent and agree to act in this capaci<br>provisions of all statutes relative to the proper and complete performance of my du | ity. I further agree to comply with th<br>uties, and I am familiar with and<br>er 605, F.S. Or, if this document is |

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 |
|-----------------|-------------------|-----------------------------------|----------------|
| AP<br>A. Honzed | Yardie Concepcion | Address 9017 Elliot Cir Tampa, Fl | 3345 Add       |
| person          |                   |                                   | □Remove        |
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| ective date, if other than<br>reffective date is listed, the dat<br>te: If the date inserted in the<br>cument's effective date on t | te must be specific and his block does not r | d cannot be prior to dat<br>meet the applicable : | e of filing or more than 9<br>statutory filing require | ( <b>optional)</b><br>0 days after (fling.) I<br>ments, this date w | Pursuant to 605,020<br>ill not be listed a |
| ecord specifies a delayed eff<br>s filed.   |  |   | at 12:01 a.m. on the eas                               | rlier of: (b) The   | 90th day after the                         |
| ed <u>February</u>  | 25th   | 2022  |  |   | 1  |
|   | Signature of a                               | member or authorized                              | representative of a mem                                | ber   |  |
|   | опенилист и                                  |   |  |   |  |
|   |  |   | uga W<br>ne bi signee                                  |   |  |