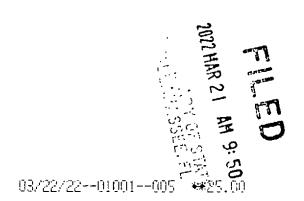
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	(Requestor's Name)	
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CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

VUSTH OP SER	VICES LLC		
		· · · · · · · · · · · · · · · · · · ·	
			
			
			A confidence (City)
			Art of Inc. File
			LTD Partnership File
			Foreign Corp. File
			L.C. File
			Fictitious Name File
			Trade/Service Mark
			Merger File
			Art, of Amend. File
			RA Resignation
			Dissolution / Withdrawal
			Annual Report / Reinstatement
			Cert. Copy_=
			Photo Copy
			Certificate of Good Standing
			Certificate of Status
			Certificate of Fictitious Name
			Corp Record Search
			Officer Search
			Fictitious Search
Cimatura			Fictitious Owner Search
Signature			Vehicle Search
			Driving Record
Requested by:			UCC 1 or 3 File
<u> </u>			- UCC 11 Search
Name	Date	Time	UCC II Retrieval
Walk-In		Up	Courier
174 Porder's Printing - Thom isvels;	SA B/CG		

COVER LETTER

	egistration Se ivision of Cor			
SUBJECT	. VUSTH	OP SERVICES LLC		
SOBJECT	•	Name of Lin	nited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspo	endence concerning this matter	to the following:	
		carlos mora		
			Name of Person	
		LETCAM ADVISOR	S LLC	
		-	Firm/Company	
		2655 le jeune road, suite 7	16	
			Address	
		coral gables fl 33134		
		<u> </u>	City/State and Zip Code	
		carlosandres@moragaitan.c		
		E-mail address: (to be used for future annual report n	otification)
For further	information c	oncerning this matter, please c	all:	
Carlos A N	⁄lora		346 4812560	
	Name o	f Person	Area Code Dayı	ime Telephone Number
Enclosed is	a check for th	ne following amount:		
≣ \$25.00	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy radditional copy is enclosed)
	ailing Addres		Street Address: Registration S	Section
	-	orporations	Division of C	
Ρ.	O. Box 632	7	The Centre of	Tallahassee
T	allahassee, F	FL 32314	2415 N. Moni	roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

VUSTH OP SERVICES LLC

TO)		
ARTICLES OF O	RGANIZATION		
Ol	F Z		
VUSTH OP SERVICES LLC			
(Name of the Limited Liability Compar (A Florida Limited L	iy as it now appears on our records.) dability Company)		
The Articles of Organization for this Limited Liability Company	were filed on and assigned.		
Florida document number L22000087954	, ,		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	ility company here:		
Willkensol investments LLC			
The new name must be distinguishable and contain the words "Limited Liabil			
Enter new principal offices address, if applicable:	2655 le jeune road		
(Principal office address MUST BE A STREET ADDRESS) suite 716	suite 716		
Principal office dadress MUST BE A STREET ABBRESS	coral gables FL 33134		
n	2655 LE JEUNE ROAD		
Enter new mailing address, if applicable:	SUITE 716		
(Mailing address MAY BE A POST OFFICE BOX)	CORAL GABLES FL 33134		
B. If amending the registered agent and/or registered office a	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:			
N. B. St. 1085 at Address.			
New Registered Office Address:	Enter Florida street address		
	, Florida		
	City Zip Code		
New Registered Agent's Signature, if changing Registered Agent:	<u>.</u>		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is		
të Cha	anging 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	SOLEDAD ELENA CAMPOS	2655 LE JEUNE ROAD SUITE 716	= Add
		coral gables <i>FI 33/34</i>	Remove
MGR	EWAN PARRY	2655 LE JEUNE ROAD SUITE 716	Change
	PARILY	CORAL GABLES F1 33134	= Add
			□Remove
4.5	FT0.004		Change
AR 	LETCAM ADVISORS LLC	2430 N 61 ST AVE	BAdd
		HOLLYWOOD FL 33024	□Remove
			Change
MGR	NOVO INTERNET SERVICE	LLC	🗆 Add
		2655 LE JEUNE ROAD SUITE 716 C	ORAL ■ ≣Remove
		Gables 33134 F	□ Change
			DAdd
			□Remove
			Change
			□Add
			□Remove
			□Change

				
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ctive date, if other than the flective date is listed, the date must 1 If the date inserted in this blo	t be specific and cannot be		r more than 90 days after	
ment's effective date on the Do			9	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ord specifies a delayed effective filed.	e date, but not an effect	ive time, at 12:01 a.r	n, on the earlier of: (b) The 90th day after t
march 21	2022			
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