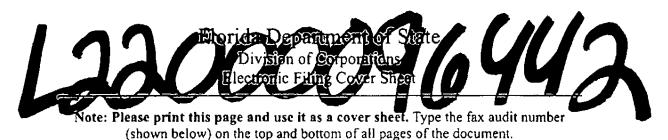
Ta:



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : R&P ACCOUNTING AND TAXES INC

Account Number : I20170000090
Phone : (305)358-1310
Fax Number : (305)503-6701

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

Email Address: arod 8723 agmail. com

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN $_{\!\scriptscriptstyle \rm C}$

#### V33 LLC

Certificate of Status	0
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### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

#### **V33 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 \_\_\_\_03/08/2022 and assigned Florida document number L22000096442.

This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited l	iability company here:	*
The new name must be distinguishable and contain the words "Limited L	iability Company." the designatio	n "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	11111111	
(Principal office address MUST BE A STREET ADDRESS		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Midming undress MAT DE AT OUT OF THEE DOM	<del> </del>	
	ce address on our records,  Enter Florida stree	
Name of New Registered Agent:		address , Florida
Name of New Registered Agent:		i address
	Enter Florida stree Ciņ	address , Florida
Name of New Registered Agent:  New Registered Office Address:	Enter Florida stree City nt:	n address , Florida Zip Code

accept the obligations of my position as registered agent as pro 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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From: Andres Rodriguez

# 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

To:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MBR	ANA CAROLINA GOULART PA	1228 WEST AVENUE UNIT 1510	XAdd
		MIAMI BEACH, FL 33139	Remove
			Change
			∏Add
			Remove
			Change
			Add
			□Remove
			☐ Change

To:

From: Andres Rodriguez