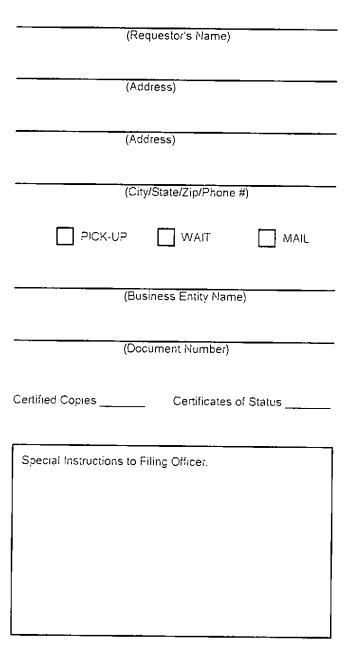
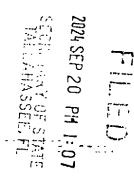
L22000 143032



Office Use Only



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2024 SEP 20 PH RE: 21

RECEIVED



COVER LETTER

TO: Registration So Division of Cor		, ///	1.
SUBJECT:	syame of Lim	ited Liability Company	Vings, LLC
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	Corra	Name of Person	caro
	·A/1 TO	Act Ja 22	
	9741X	1. W. 130=	Hh 5/
	Hialaah	Address City/State and Zip Code	H 33018
		City/State and Zip Code	'
	E-mail address: (to be used for future annual report not	fication)
For further information of	concerning this matter, please c	ail:	
Name :	of Person	at () Area Code Daytim	E Telephone Number
Enclosed is a check for I	the 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 Section
Division of Corporations
P.O. Box 6327

Street Address:
Registration Section
Division of Corporations
The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

f Organization for this Limited Liability Company were filed on and the number 42200143032

The Articles of Organization for this Limited Liability Company	were filed on 5000.	and a	ssigned
Florida document number <u>LAZ(NO14303</u> 2))	2024 S.C.C. T.A.	
This amendment is submitted to amend the following:		SEP 2	
A. If amending name, enter the new name of the limited liabi	<u>lity company here</u> :	20 PM	
The new name must be distinguishable and contain the words "Limited Liabili	ity Company," the designation "LLC" or	the abbreviation.	L.L.C.
Enter new principal offices address, if applicable:			<u> </u>
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	9741 N. U2 1 HILLOGH Gas 3=	30+h dens,f 3018	S). =[

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

Zip Code

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.

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>	<u>Name</u>	Address	Type of Action
P	Corrado Vacca	Address 10 974/ N.W. 130 45	1 DAdd
		Hialsah Gardans, FI	` □Remove
	. 1	33018	□Change
<u>m BR</u>	Jazmin Vaccaro	9741 N.W. 130 HS	
		Hickory Gardans, Fl	□Remove
		<u>33018</u>	(D)Change
			□Add
			Change
			□Add
			🗆 Remove
			Change
			□Add
			□Remove
			□Change
			🖸 Add
			□Remove
			Change

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
	
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(If an effective Note: If	tive date, if other than the date of filing: (optional) (ive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3) (the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as that's effective date on the Department of State's records.
he record ord is filed	specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the d.
Dated _	30A. 20 Jan Cara () (1)
	Signature of a member or authorized representative of a member

Filing Fee: \$25.00