

122000147893

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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07/05/22--01019--004 **30.00

2022 JUL -5 AM 8:32

10/8/2022

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Vamo Property LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Isabel Ana Morales Herrera
Name of Person

Vamo Property LLC
Firm/Company

1435 S. Leavitt Ave 103
Address

Orange city FL 32763
City/State and Zip Code

amoh.e.21@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Isabel Ana Morales at (408) 648-3034
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

☐ \$25.00 Filing Fee

☒ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

Mailing Address:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 310
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Yamo Property LLC

2022 JUL -5 AM 8:32

(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 March 28, 2022 and assigned
Florida document number L 22000147893

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)

1435 S. Leavitt Ave 103
Orange city FL 32763

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1435 S. Leavitt Ave
103
Orange city, FL 32763

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:

Isabel Ana Morales Herrera

New Registered Office Address:

1435 S. Leavitt Ave suite 103

Enter Florida street address

Orange city, Florida 32763

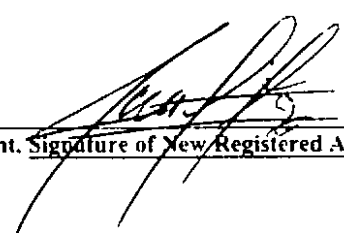
City

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.

If 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>	<u>Address</u>	<u>Type of Action</u>
MGR	Lisa	Morales	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Isabel Ana	Morales	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Change mailing / physical Address

from: 1065 S. Volusia Ave ES

TO: 1435 S. Leavitt Ave
103

Orange City FL 32763
408-648-3034

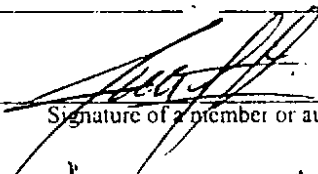
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective 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)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated _____



Signature of a member or authorized representative of a member

Luisa Morales Herrera

Typed or printed name of signer