

To:

Page: 1 of 4

2024-09-11 02:40:42 UTC+14

18506176383

From: ZenBusiness User

2024-09-11 08:37 AM

Division of Corporations

Florida Department of State

Division of Corporations

Electronic Filing Case Sheet

H24000307550.3

L22000/66595

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H24000307550.3))



H240003075503AEC-

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ZENBUSINESS INC.

Account Number : I20230000190

Phone : (844)449-3624

Fax Number : (512)597-0678

FILED
2024 SEP 10 AM 8:05
FLEXFILE

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

Email Address: _____

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VECTORBOOST VENTURES LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

K. SALY

H24000307550.3

SEP 11 2024

To:

Page: 2 of 4

2024-09-11 02:40:42 UTC+14

18506176393

From: ZenBusiness User

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H24000307550.3

VectorBoost Ventures 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 04/06/2022 and assigned
Florida document number 1.22000166595.

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:

3492 Coral Springs Dr

(Principal office address **MUST BE A STREET ADDRESS**)

Coral Springs, FL 33065

Enter new mailing address, if applicable:

3492 Coral Springs Dr

(Mailing address **MAY BE A POST OFFICE BOX**)

Coral Springs, FL 33065

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

Florida

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

H24000307550.3

To:

Page: 3 of 4

2024-09-11 02:40:42 UTC+14

18506176383

From: ZenBusiness User

H24000307550 3

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>
AMBR	Gilfred Anthony Bertin JR	3492 Coral Springs Dr	☐ Add
		Coral Springs, FL 33065	☐ Remove
			☒ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change

2024 SEP 10 AM 3:10
FILED
FBI - MIAMI

H24000307550 3

11240001507550 3

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

FILED
01 MAR 3 10
2024 SEP 10 10 37 AM
FBI - NEW YORK

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 September 10th 2024

As/ Gilfred Anthony Beron JK

Signature of a member or authorized representative of a member

Gilfred Anthony Berlin JR

Typed or printed name of signer

11240061317550.3

Filing Fee: \$25.00