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(((H22000270122 3)))



H220002701223ABCS

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## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VIDA MAXIMA COMPANY LLC

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AUG 1 1 2022

## **COVER LETTER**

TO: Registration Solution of Co.		e. •		
		MA COMPANY LLC		
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	LOVETTE DOBSON			
		Name of Person		
		Firm/Company	<del></del>	
	17350 STATE HWY 249 S			
		Address		
	HOUSTON, TX 77064	City/State and Zip Code		
	EFILE1234@INCFILE.CO	M		
For further information	E-mail address: ( concerning this matter, please c	to be used for future annual re	eport notification)	— ···
LOVETTE DOBSON	evileering this nation, pressor	ı	888-462-3453	
Name	of Person	at () Area Code	Daytime Telepho	one Number
Enclosed is a check for	the following amount:			
<b>≘</b> \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enck		\$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addre Registration		<u>Street Ad</u> Registra	dress: tion Section	
Division of (	Corporations	Division	of Corporation	
P.O. Box 63 Tallahassee,			tre of Tallaha. Monroe Stree	

Tallahassee, FL 32303

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIDA MAXIMA COMPANY LLC

(Name of the Limited Liability Comp (A Florida Limited	pany as it now appears. I Liability Company)	on our records.)	<del></del>
The Articles of Organization for this Limited Liability Compan Florida document number	y were filed on	04/06/2022	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited lia	bility company her	<u>e</u> :	
The new name must be distinguishable and contain the words "Limited Liab	bility Company," the des	ignation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our rec	cords, <u>enter the</u> пап	ne of the new registered
Name of New Registered Agent:			<b>2022</b>
New Registered Office Address:		la street address , Florida	APPRO
	Cuy		Trip the BOX
New Registered Agent's Signature, if changing Registered Agen			99
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and comple- accept the obligations of my position as registered agent a- being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	te performance of n s provided for in Cl	ny duties, and I am hapter 605, F.S. Or	familiar with and , if this document is
If Ch	ranging Registered Age	nt, Signature of New Re	egistered Agent

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If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records: (((H22000270122 3)))

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	ANDERSON MENDONCA RZZUTO	2000 VILLAGE LANE, APT 1713	🗀 Add
		WINTER PARK, FL 32792	Remove
			□Change
AMBR	RENATA VEIGA M DE S RIZZUTO	2000 VILLAGE LANE, APT 1713	□Add
		WINTER PARK, FL 32792	■Remove
			Change
			□Remove
			Change
			∏Add
			□Remove
			Change
			□Add
			□Change
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			Remove
			□Change

Effective date, if other than the date of filing:    Goptional   Goptional								
Effective date, if other than the date of filing:  [I an effective date is fired, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605 0207  Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as document's effective date on the Department of State's records.  Be 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 of is filed.  Dated  Alexandre Straug Finhere  Squattre of a member or authorized representative of a member.	_							
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		Alexandre	Signature of:	member or authori	zed representative of	f a member		

Filing Fee: \$25.00