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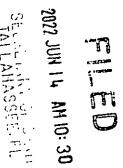
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(Address)  (Address)  (City/State/Zip/Phone #)  PICK-UP WAIT MAIL  (Business Entity Name)  (Document Number)  Certified Copies Certificates of Status Special Instructions to Filing Officer:		
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Office Use Only



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## **COVER LETTER**

TO:	Registration Se Division of Cor			<b>3</b> ° ₹	
		VIVA	TWO LLC	•	
SUBJ	ECT:	Name of Lim	nited Liability Company		
The en	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	indence concerning this matter	to the following:		
			ARIAĐNA OJEDA		
			Name of Person		
			AYUDA CENTER		
			Firm/Company	<del></del>	
			8230 CORAL WAY		
			Address		
			MIAMI, FL 33155		
		<del>1-1</del>	City/State and Zip Code		
			EDA@AYUDACENTER.COM		
			to be used for future annual report not	ification)	
For fu	rther information c	oncerning this matter, please c	all:		
	ARIADN	A OJEDA	305 971-5		
	Name o	f Person	Area Code Daytin	ne Telephone Number	
Enclos	sed is a check for th	ne following amount:			
<b>≡</b> \$2	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 Addres Registration S		Street Address: Registration Se	ection	
Division of Corporations		Division of Corporations			
	P.O. Box 632		The Centre of		
	Tallahassee, I	に コとコ にせ	4410 N. IVIONIC	be Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

VIVA TWO LLC

Ne of the Limited Liability Company as it now appears on our Seconds.)

(Name of the Limited Liability	Company as it now appears	on our records.)	1
( <u>Name of the Limited Liahility</u> (A Florida I	umited Liability Company)	TALLAH	ASSEE! FL'
The Articles of Organization for this Limited Liability Co	mpany were filed on	04/07/2022	and assigned
Florida document numberL22000166845	_•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ed liability company her	<u>'e</u> :	
The new name must be distinguishable and contain the words "Limite	ed Liability Company," the des	signation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	<del></del> + <del></del> -	<del></del>	
(Principal office address MUST BE A STREET ADDRE	<u> </u>		
Enter new mailing address, if applicable:			
Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	office address on our re	cords, <u>enter the na</u>	me of the new regis
Name of New Registered Agent:			
New Project of Office Address			
New Registered Office Address:	Enter Florid	da street address	
		, Florida _	
<del></del>	City	, ir tot tux _	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 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
MGR	ROBERTO VARGAS PALMA		□ Add
		3732 OAK RIDGE LANE, WESTON, FL 33331	Remove
			ElChange
			□Add
			□Remove
			[]Change
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fective date, if other than the	late of filing	α·	05/09/2022		(optional	D.		
an effective date is listed, the date mus	be specific and	l cannot be prior	to date of filing o	r more than 90 day	ys after filin	g.) Pursuar	t to 605.0	0207
ote: If the date inserted in this blocument's effective date on the De			ibic statutory it	ing requiremen	as, uns gat	e will not	be liste	d as
record specifies a delayed effective is filed.	date, but not	an effective ti	me, at 12;01 a.r	n. on the earlier	of: (b) T	he 90th d	lay after	the
MAY 9TH		2022_	<i>, '</i>					
	· · · · · · · · · · · · · · · · · · ·	Ellan	- i/					
	Signature of a	member or author	rived representat	ive of a member				
			/	are or a memori				
		,	ARCIA FLUX					