Division of Corporations



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.

(((H22000417097 3)))



H220004170973ABC%

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 : PARASEC

Account Number : I20180000086 Phone : (915)576-7000

Fax Number : (800)603-5868

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

Email	Address:	RLOPS@PARASE	C COM
CHIALL	Auuress.	おし ひとっゆ ヒカドカフト	- (- (ED))

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VARDANKAR LLC

Facilities in the Committee of the Commi	
Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

C. BRUMBLEY	C.	BRU	MB	LEY
-------------	----	-----	----	-----

DEC 1 2 2022

Electronic Filing Menu Corporate Filing Menu

Help

To: 18506176383 From: 19166105073 Date: 12/12/22 Time: 5:28 PM Page: 03/05

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vardankar LLC			
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appead Liability Company)	irs on our records.)	
The Articles of Organization for this Limited Liability Compa	ny were filed on _	04/27/2022	and assigned
Florida document number <u>1.22000200563</u> .			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited li	chility company h	ere:	
The new name must be distinguishable and contain the words "Limited Lie	bility 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)			~ 2
		· · · · · · · · · · · · · · · · · · ·	122 120 120
		:	T DEC
Enter new mailing address, if applicable:			7 7
Mailing address MAY BE A POST OFFICE BON			
		· · · · · · · · · · · · · · · · · · ·	7 7 N
		1	: 43
B. If amending the registered agent and/or registered offic agent and/or the new registered office address here:	e address on our	records, <u>enter the na</u>	me of the new registo
Name of New Registered Agent:			
	-		
New Registered Office Address:	Enter Fle	vula 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.

To: 18506176383 From: 19166105073 Date: 12/12/22 Time: 5:28 PM Page: 04/05

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>	Type of Action
AMBR	Shawn Doucet	1221 Old Esquimalt Rd	🗀 Add
		Victoria B.C V9A 4N7, Canada	N.Remove
			□Change
AMBR	Heather Giamboi	2520 N. McMullen Booth Road B-333	
		Clearwater, FL 33761	<u>S</u> Remove
			□ Change
			
			©Remove
			© Change
			CAdd
			□Remove
			□Change
		- <u></u>	□Add
			□Remove
			UChange
			🗆 Add
			□Remove
			[] Cirange

To: 18506176383 From: 19166105073 Date: 12/12/22 Time: 5:28 PM Page: 05/05

			·			
						<u> </u>
_						
_						
_						
			<u>-</u>			
_						
_	·					
						
Note: If	e date, if other than tive date is listed, the dat the date inserted in that's effective date on t	us block does not	, meet the applica	to date of filing or mo thle statutory filing	(option or than 90 days after the requirements, this	nal) (ling) Puisuant to 605 020 date will not be listed a
he tecord : ord is filed		ective date, but n	ot an effective tir	me, at 12 01 a.m. c	on the earlier of (b)	The 90th day after the
Dated	December 9		. 2022			
	December 9	Heathe	r Giambo	i		
		Supating of	a member or sutho	rized representative	ot a member	
		Signitore of	a memori or accio			

Filing Fee: \$25.00