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To:

Division of Corporations

From: 7188888559

Fax Number : (850)617-6383

From:

Account Name : I.N.C. CORPORATE SERVICES

Account Number : I2000000011 Phone : (718)888-7773 Fax Number : (718)888-8559

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

Email Address: ____CS@INCFILINGS.COM

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

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OCT 1 2 2022 K. Brumbley 10/11/2022 15:55

From:7188888559

I N C Webfax

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VANDAL LLC		
(<u>Name of the Limited</u> (A	Liability Company as it now appears on our records.) Fiorida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L22000332185	oility Company were filed on JULY 27, 2022	and assigned
This amendment is submitted to amend the follow	ring:	
A. If amending name, enter the new name of the	he limited liability company here:	
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applicab	de:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or reg agent and/or the new registered office address	istered office address on our records, <u>enter the nam</u> <u>here</u> :	e of the new registe
Name of New Registered Agent:		220
New Registered Office Address:	Enter Florida street address	
	, Florida	
New Registered Agent's Signature, if changing Re	City	7.10 Cards
·	-	east to common with t
	agent and agree to act in this capacity. I further ag	

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.

From:7188888559

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
AMBR	RANDEE PARK	130 WICKS ROAD	
		COMMACK, NY 11725	□Remove
			□Add
			□Remove
			Change
			□Add
			□ Remove
			Change
			□Add
		Remove	
			□Change
			Cladd
			[]Change
			□Add
			□ Remove
			□ Change

D. If amending	ny other information, enter change(s) here: (Attach additional sheets, if necessary.)	
		
 -		
		
		
 		
		
(If an effective da <u>Note:</u> If the d	if other than the date of filing:	.0207 (3)(1 ed as the
f the record specification is filed.	es a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after	the .
Dated OCTO	THE ALL THE STATE OF THE STATE	
	Signature of a member or authorized representative of a member	
W	LIAM CHOI, AUTHORIZED MEMBER	
	Typed or printed name of signee	

Filing Fee: \$25.00