L22000359819

7/7/23 11,06 AM

Division of Corporations

Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : CONTADORMIAMI.COM INC

Account Number : 120200000130 Phone : (954)345-7888 Fax Number : (786)713-1940

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

Email Address:

2023 JUL -7 PM 5: 08

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VLS FLORIDA LLC

Certificate of Status	0
Certified Copy	0
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https://etile.sunbiz.org/scripts/efilcovr.exe

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7/7/23, 11 06 AM

Estimated Charge \$25.00

> Corporate Filing Menu Electronic Filing Menu Help

Division of Corporations

2/2 https://efile.sunbiz.org/scripts/efilcovr.exe

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

		.	
(Nome of the Limit	VLS FLORID		r records)
(Name a) Inc trum	(A Florida Limited L	ny as It now appears on ou liability Company)	70
The Articles of Organization for this Limited L	ability Company	were filed on 08/16/202	and assigned 3
Florida document number 1.22000359819			?
This amendment is submitted to amend the follo	owing:		·
A. If amending name, enter the new name o	f the limited liab	ility company here:	
			The state of the s
The new name must be distinguishable and contain the w	rords "Limited Liabi	lity Company," the designati	on "LLC" or the abbreviation "L.L.C.
Enter new principal offices address, if applicable:		19370 COLLINS AVE	APT 324
(Principal office address MUST BE A STREE		SUNNY ISLES, FL 33	160
Enter new mailing address, if applicable:		19370 COLLINS AVE	APT 324
Mailing address MAY BE A POST OFFICE BOX)		SUNNY ISLES, FL 33160	
			£45
B. If amending the registered agent and/or	registered office :	address on our records	enter the name of the new registere
agent and/or the new registered office addre	33 HC1 C-		
Name of Navy Parietared Agents	ACCOUNTAN	IT & MANAGEM E NT, I	NC.
Name of New Registered Agent:	1549 NE 123R	D CUBERT	
New Registered Office Address:	1349 NE 123K	Enter Florida stre	ret address
	NORTH MIAN	MI	73 Jun 33161
	110111111111111111111111111111111111111	City	Florida 33161 Zip Code
New Registered Agent's Signature, if changing	Registered Agent:		
hereby accept the appointment as registere			ity. I further agree to comply with th
hereby accept the appointment as registere provisions of all statutes relative to the prop accept the obligations of my position as regi	er and complete	performance of my di	uties, and I am Jamillar Wiln and
nccept the obligations of my position as regional position as regional position as regional file of the company has been notified in writing of this	registered office	address, I hereby cor	firm that the limited liability
	*		
	1.	1	<u></u>
	Cha	nging Registered Agent, Si	gnature of New Registered 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:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	GUIDO, LUIS ERNESTO	19370 COLLINS AVE 324 SUNNY ISLES	=Add
		SUNNY ISLES, FL 33160	□Remove
			Change
GEN COUN	BRANTLEY, BRIAN	19500 SH 249	□Add
		HOUSTON, TX 77070	BRemove
			Change
		·	□ Ađd
			CRemove
			Change
			□Add
			□Remove
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 If the date inserte 	d in this block coes	not weer me appress	date of filing of mor le statutory filing (equirements, this	date will not be listed
ment's effective da	z on the Department	t of State's records.			
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	Signature	of a member or authoriz	EQ teffesemmine o	a member	