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(Re	questor's Name)	
(Ad	dress)	
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PłCK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
J. Dennis 1.	8 · 25	
V	Office Use Or	alv



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Ret. 12/12/24

2025 JAN -8 PH 2: 19 SECRETARY OF STATE

COVER LETTER

то:					
SURIE	ст.	_			
Name of Limited Liability Company					
Division of Corporations Subject: Serena Daytona LLC					
				-	
Please r	eturn	all correspo	ndence concerning this matter	to the following:	
			Lance Silver		
				Name of Person	
			VC Management Florida I	LC	
				Firm/Company	
			400 Cleveland Street		
•				Address	
			Clearwater, FL 33755		
				City/State and Zip Code	-
				to be used for future annual report notification)
For furth	her in	formation co	oncerning this matter, please c	all:	•
Lance S	Silver				
		Name of	Person		hone Number
Enclosed	d is a	check for th	e following amount:		
■ \$25	.00 Fi	iling Fee		Certified Copy	Certificate of Status &
	Reg Div P.O	istration S ision of Co . Box 632	ection orporations 7	Registration Section Division of Corporati The Centre of Tallah 2415 N. Monroe Stre	et, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SERENA DAYTONA LLC			
(Name of the Lin	nited Liability Company as it now appe (A Florida Limited Liability Company	ears on our records.)	
The Articles of Organization for this Limited	Liability Company were filed on S	September 29, 2022	_ and assigned
Florida document number L22000422728	·		_ •
This amendment is submitted to amend the fo	llowing:		
A. If amending name, enter the new name	of the limited liability company	here:	
Daytona Valor Capital LLC			
he new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if appl	icable:	2.2	2025
(Principal office address MUST BE A STREET ADDRESS)		i in	SA H
			1
			PH #
Enter new mailing address, if applicable:			<u>~</u>
Mailing address MAY BE A POST OFFICE	<u></u>	31 4 T	<u></u>
			•
3. If amending the registered agent and/or agent and/or the new registered office addr	registered office address on our ess here:	records, enter the name of	of the new registe
Name of New Registered Agent:	Lance Silver		
New Registered Office Address:	400 Cleveland Street		
	Enter Fl	orida street address	_
	Clearwater	, Florida ³³⁷⁵	5
	City		Zin 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 Changing Registered Agent, Signature of New Registered Agent

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
			□ Add
		□Remove	
			Change
			□Add
			□ Change
· 			
			Remove
			Change
	·		□Add
			□Remove
			□Change
			□Add
			□Remove
			Change

Effective date, if other than the date of filing: [In an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.02 Mote. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed adocument's effective date on the Department of State's records. Frecord 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 dis filed. Detailed October 23 Signature of a member or authorized representative of a member			_
Effective date, if other than the date of filing:			_
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Signature of a member or authorized representative of a member	Octob Dated	er 23 2024 .	
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		Signature of a member or authorized representative of a member	
Lance Silver	_	Typed or printed name of signee	

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