

(Re	equestor's Name)	
(Ad	dress)	
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(Cit	ty/State/Zip/Phone #))
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Name)	·
(Do	ocument Number)	
Certified Copies	_ Certificates of	Status
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COVER LETTER

Division of Corporations
SUBJECT: Florida CC Nama Amendment Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Come Play Came LLC
4058 13+4 St Suite # 1104
Saint Cloud FL 34769 City/State and Zip Code
CS. Come Play Carus @ gmail. (orn E-mail address: (to be used for future single report notification)
For further information concerning this matter, please call:
Kareim Wr, 9 ht at (754), 667-9444 Name of Person Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigsquare \text{Solutions}\$ \$55.00 Filing Fee \$\Bigsquare \text{Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\Bigsquare \text{Solutions}\$ \$\Bigsquare \text{Certified Copy}\$ (additional copy is enclosed)

TO:

Registration Section

Mailing Address: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Come May Cams, LLC	
(Name of the Limited Liability Compar (A Florida Limited).	y as it now appears on our records.)
The Articles of Organization for this Limited Liability Company of Florida document number <u>122000462230</u> . This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
Vivi Digital Marketing Enterprises The new name must be distinguishable and contain the words "Limited Liability	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	4058 1314 Street Suite 1104 Sand Cloud, FL 34769
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	4058 13th Street Suite 1104 Sant Cloud, FL 34769
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	HAR 22
New Registered Office Address:	Enter Florida street address Florida Zup Code
New Registered Agent's Signature, if changing Registered Agent:	
I hereby accept the appointment as registered agent and agreerovisions of all statutes relative to the proper and complete	ee to act in this capacity. I further agree to comply with the 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. Thereby 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
		70	□Remove
		3	□Change
			□Add
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			□Remove
			□Change

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	(5)
	C. C. F. S. C.
·	March 17 2023 (optional)
eeffective date is listed, the date must be specific and cant	not be prior to date of fiting or more than 90 days after fiting.) Pursuant to 602.3
te: If the date inserted in this block does not meet	the applicable statutory filing requirements, this date will not be fister
cument's effective date on the Department of State	s records.
	man and the second of the seco
cord specifies a delayed effective date, but not an e s filed.	effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after
s med.	
, March 17	2023
ca <u>'</u> /	<u> </u>
March 17 Signature of a mem	
Signature of a mem	ber or authorized representative of a member
Kareim Wright	