To:

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#### COVER LETTER

#### TO: Registration Section Division of Corporations

VICMAN INVESTMENTS LEC

SUBJECT:

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:

Rubern Souza

Name of Person

Medeiros Souza corp-

Firm/Company

1711 Amazing Way, Ste 213

Address

Ococc, FL 34761

City/State and Zip Code

contactajjmedeirossouza.com

I -mail address: (to be used for future annual report notification).

For further information concerning this matter, please call:

Enclosed is a check for the following amount:

🔲 \$25.00 Filling Fee

\$30.00 Filing Fee & Certificate of Status \$55.00 Filing Fee & Certified Copy radditional copy is enclosed) \$60.00 Filing Fee, Certificate of Status & Certified Copy -additional copy is enclosed.

<u>MailingAddress:</u> Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 <u>StreetAddress:</u> Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303 Τo.

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# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

#### VICMAN INVESTMENTS LLC

#### (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on <u>1./09/2022</u> and assigned Florida document number <u>1.22000480624</u>.

This amendment is submitted to amend the following:

### A. If amending name, enter the new name of the limited liability company here:

he abbreviation "[1.C."
(fice address MUST BE A STREET ADDRESS)
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B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> <u>agent and/or the new registered office address here</u>:

Name of New Registered Agent:	MEDEIROS SOUZA CORP	
New Registered Office Address:	1711 Amazing Way, Ste 213	
	Enter	Florida street address
	Ococe	. Florida <sup>3476]</sup>
	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.

If Changing Registered Agent, Signature of New Registered Agent

14076046519

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person</u> being added or removed from our records:

## MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR	PINTO, RICARDO A	707 Centerbrook Dr.	Ə Add
		Brandon, FL 33511	
AMBR	Counting Stars Holding Inc	1711 Amazing Way Ste 213	🚊 Add
		Ococe, FL, 34761	[]Remove
			[] Change
			🗆 Add
			🗆 Remove
			□Change
			□Add
			🖾 Remove
		, <b></b> ,	[]Change
	<u></u>		🗆 Add
			DRemove
		,	⊡Change
			ƏAdd
			[]Remove
			□ Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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If the record specifies a delayed effective date, but not an effective time, at 12.01 a million the earlier of (h). The 90th day after the record is filed

Orlando Dated	10/03/2023	
Şi	gnature of a member or authorized representative of a member	
Rubern Souza		
	Typed or printed name of signee	