L 23666 10 10 11

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200435415212

08/27/24--01012--018 **25.00



C8/24/24

COVER LETTER

	gistration S vision of Co				
SUBJECT:		DESIGNS LLC.			
SOBJECT.		Name of Lin	nited Liability Company		
The enclosed	d Articles of	Amendment and fee(s) are sul	bmitted for filing.		
Please return	ı all correspo	ondence concerning this matter	r to the following:		
		OSCAR E. VANEGAS			
			Name of Person		
			Firm/Company		
		14233 SW 129 PL			
			Address		
		MIAMI, FL 33186			
			City/State and Zip Code		
		VANEGAST1@GMAIL.C			
For further in	iformation c	E-mail address: (oncerning this matter, please c	to be used for future annual report notif	fication)	
OSCAR E. V		J	786 389-7090		
	Name o	f Person		Telephone Number	
Enclosed is a	check for th	e following amount:			
≘ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	ling Address		Street Address:	tion	
Registration Section Division of Corporations			Registration Section Division of Corporations		
P.O	. Box 632	7	The Centre of Ta		
Tall	lahassee, F	L 32314	2415 N. Monroe	Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VANTEK DESIGNS LLC		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our rec Liability Company)	erds.)
The Articles of Organization for this Limited Liability Company	were filed on 01/25/2023	and assigned
lorida document number L23000048034		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	oility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "L	LLC" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:	13731 SW 116 Terrace	
Principal office address MUST BE A STREET ADDRESS)	Maimi, FL 33186	:
		•
nter new mailing address, if applicable:	13731 SW 116 Terrace	, [
Mailing address MAY BE A POST OFFICE BOX)	Maimi, FL 33186	(ii) = 1
· · · · · · · · · · · · · · · · · · ·		L: 5
. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>ent</u>	er the name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street add	trass
	City	Florida

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
AMBR	BERRIO, STEPHANY	14233 SW 129 PL	_	□Add
		MIAMI, FL 33186		■Remove
				□Change
				□Add
				□Remove
				🗆 Change
			<u> </u>	□Add
			-1	□Remove
				Change
			<u> </u>	□Add □Remove
				□Change
 				□Add
				□Remove
				🗆 Change
-				□Add
				□Remove
				_ Change

amending any other infor	mation, enter change(s) here: (Attac	ch additional sheets, if nec	essary.)	
	-			
				_
 			- ···-	
			<u> </u>	
			·. · · · · · · · · · · · · · · · · · ·	
				
			· · · · · · · · · · · · · · · · · · ·	
		,	; <u></u>	,
			(1)	••
			141 45	
		44444	_	
				
fective date, if other than t	he date of filing:	(optio	onal)	to 60 6
ote: If the date inserted in this	block does not meet the applicable statut	tory filing requirements, this	date will no	ot be list
rument's effective date on the	Department of State's records.			
ecord specifies a delayed effec	tive date, but not an effective time, at 12:	01 a m. on the earlier of: (h	The 90th	day afte
is filed.		or all on the currer on to	, ,,,,,,	day unc
August 20	2024			
ated				
<	1			
	Signature of a member or authorized repre	esentative of a member		
OSCAR E. VANEGA	AS			
-	Typed or printed name of	signce		