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





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2024 F (1) -5 F (1) 5: 30

Cy 2/19/2024

TO: Registration Section Division of Corporations

O = 7 4% = \$1 CTT=1	LYWOOD BCH HOTEL MGR	LLC	
		nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corre	spondence concerning this matter	to the following:	
	Patrick Voltapetti		
		Name of Person	
	VA HOLLYWOOD BCH	HOTEL MGR, LLC	
		Firm/Company	
	2719 Hollywood Blvd Ste	172	
		Address	
	Hollywood, FL 33020		
		City/State and Zip Code	
	pvoltapetti@gmail.com		
		to be used for future annual report n	otilication)
For further information	a concerning this matter, please c	all:	
Patrick Voltapetti		305 5426340	
Name	e of Person	at () Area Code Dayt	ine Telephone Number
Enclosed is a check fo	r the following amount:		
■ \$25.00 Filing Fee	S30.00 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)

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 ORGANIZATION OF

VA HOLLYWOOD BCH HOTEL MGR, LLC

2024F27-5 EX 5:30

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

he Articles of Organization for this Limited Liability Co	mpany were filed on $\frac{C}{C}$	03/16/2023 and assigned
lorida document number L23000135147		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limit	ed liability company	<u>here</u> :
he new name must be distinguishable and contain the words "Limite	ed Liability Company," the	designation "LLC" or the abbreviation "L.L.C."
inter new principal offices address, if applicable:	2719 Hollywo	od Blyd Ste 172
Principal office address MUST BE A STREET ADDRI	Hollywood, F	1, 33020
inter new mailing address, if applicable:	2719 Hollywo	od Blvd Ste L-72
Mailing address MAY BE A POST OFFICE BOX)	Hollywood, F	1,33020
B. If amending the registered agent and/or registered gent and/or the new registered office address here:	office address on our	records, enter the name of the new regis
Name of New Registered Agent:		
New Registered Office Address: 2719 He	ollywood Blvd Ste L-72	
	Finter F1	orida street address
Hollywo		, Florida 33020
	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.

MGR = Manager

AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	PV & KM HOLDINGS, LLC	2719 Hollywood Blvd Ste L-72	□Add
		Hollywood, FL 33020	□Remove
			= Change
<u>.</u>			□Add
			□ Remove
			□Change
			
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			Change
			□Remove
			□Change

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(If an effect <u>Note:</u> If	te, if other than the date of filing:
f the record s ecord is filed	ifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of; (b) The 90th day after the
Dated	2023
	Signature of a member or authorized representative of a member
	urick Voltapeut , KATHERINE MORENO
	Typed or printed name of signee