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TO:

Registration Section

Division of Corporations			
VIP PRE	MIER GENERAL SERVICES I	LLC .	
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	oondence concerning this matter	to the following:	
	JUAN POLANCO		
		Name of Person	
UBJECT: Name of Limited Liability Company			
		Firm/Company	
	1380 SARNO RD		
		Address	
	MELBOURNE, FL 32935		
	NICO CONTACTOR	City/State and Zip Code	
		to be used for future annual report not	ification)
For further information	concerning this matter, please c	all:	
JUAN POLANCO		321 345-7335	
Name	of Person		ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee &	Certified Copy	Certificate of Status & Certified Copy
Registration Division of	Section Corporations 27	Registration Se Division of Co The Centre of T	rporations

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VIP PREMIER GENERAL SERVICES LLC		
(Name of the Limited Liability Compa (A Florida Limited)	inv as it now appears on our recor Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company	were filed on <u>03/17/2023</u>	and assigned
Florida document number L23000138293		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)		A
		Ř. 2
		2888 6 LE
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		9. . 1A1 ORI
•		Sm €
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>ente</u>	the name of the new registe
Name of New Registered Agent:		_
New Registered Office Address:		
	Enter Florida street addre	SS
		lorida
	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

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>	Name	<u>Address</u>	Type of Action
MGR	FERNANDA VIEGA DE MAGAL	2645 ROCKLYN ST	■Add
		CAMARILLO, CA 93010	□Remove
		-	□Change
	·		□Add
			□ Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□ Change

	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
(If an ci	five date, if other than the date of filing:
the reco	rd 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 iled.
ъ.	APRIL 16 2024
Dated	
	Signature of a member or authorized representative of a member