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(((H230002063773)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : WEISS SEROTA HELFMAN COLE & BIERMAN PL

Account Number : I20220000155 : (305)854-0800 Fax Number : (305)854-0800

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fernanda.ruiz@mindsetbr.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN **RUIZ SOLUTIONS, LLC**

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## COVER LETTER :

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The end	clos	sed Ai	rticle	s of Ai	mendment and fee(s) are su	bmitted for filing.		
Please	retu	ırn all	corr	respond	ence concerning this matte	r to the following:		
						Fernanda Ruiz		
						Name of Person		
						Firm/Company		
						2640 SW 30TH Ave	!	
						Address	<del> </del>	<u></u>
						Miami, FL 33133		
						City/State and Zip Code		<del></del>
						nanda.ruiz@mindsetbr.co (to be used for future annua		diam)
For furt	ther	infor	mati	on con	cerning this matter, please of		г терон пописа	190n)
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			Na	me of P	crson	at () Area Code	Daytime 1	elephone Number
Enclose	ed is	s a ch	eck I	for the	following amount:			
<b>≡</b> \$25	5.00	) Filin	ig Fe	ee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee Certified Copy (additional copy is en		☐ \$60.00 Filing Fee. Certificate of Status & Certified Copy (additional copy is enclosed)

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

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

To:

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(((H23000206377 3)))

Florida document number  L23000184908  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  VIP MIAMI, LLC:  The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."  Enter new principal offices address, if applicable:  (Principal office address MUST BE A STREET ADDRESS)  Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)  B. If amending the registered agent and/or registered office address on our records, enter the fixine of the new registered agent and/or registered office address on our records, enter the fixine of the new registered agent and/or registered office address on our records, enter the fixine of the new registered agent and/or registered office address on our records, enter the fixine of the new registered agent and/or registered office address on our records, enter the fixine of the new registered agent and/or registered office address on our records, enter the fixine of the new registered agent and/or registered office address on our records, enter the fixine of the new registered agent and/or registered address on our records.	()	Liability Company as it now appears Florida Limited Liability Company)	s on our records.)	
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		-		
City Florida Co			da street address	<del></del>
City 52ip Code <sup>2</sup>		Enter Florid		
New Registered Agent's Signature, if changing Registered Agent:		Enter Florid		

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.

To:

\_\_\_\_\_ Change

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 = N AMBR = A	Annager Authorized Member	()()	H23000206377 3)))
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Eduardo Guarnicri Junior	2640 SW 30TH AVE, Miami, FL 33133	<b>=</b> Add
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To:

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