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Division of Corporations

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COVER LETTER

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SURFECT	VIS INDU	STRIES LLC		
JOBSEC 1.		Name of Lim	ited Liability Company	<u> </u>
		Amendment and fee(s) are sub		
		Cheyenne Moseley		
			Name of Person	
		Legalzoom.com. Inc.		
			Firm/Company	
		101 N Brand Blvd 11th Fl		
			Address	
		Glendale, CA 91203		
		mimscents1@gmail.com	City/State and Zip Code	
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Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, Fl. 32301 To:

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

15125973041

VIS INDUSTRIES LLC					
(<u>Name of the Lim</u>	ited Liability Comp: (A Florida Limited	iny as it now appears on Liability Company)	our records.)		
The Articles of Organization for this Limited Florida document number L23000227070	were filed on 05/08/	2023	and assigne	:d	
This amendment is submitted to amend the fol	lowing:				
A. If amending name, enter the new name	of the limited liab	ility company here:			
The new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the design	nation "LLC" or th	e abbreviation "L.L.C."	
Enter new principal offices address, if appli	7842 LAND O LAK	CES BLVD, #159)		
(Principal office address MUST BE A STRE	LAND O LAKES, FL 34638				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		7842 LAND O LAK)	-
B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent: New Registered Office Address:	SCARLA MIN	<u>e</u> :		ter the name 23 JUL 18 PM	he n
	LAND O LAK			34638	
	- LAND O LAN	City	, Florida	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:

15125973041

MGR = Manager AMBR = Authorized Member

To:

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Scarla Mims		
			Remove
		7842 LAND O LAKES BLVD, #159, LAND O LAKES, FL 34638	
AMBR	Victor Mims		Add
			□ Remove
		7842 LAND O LAKES BLVD. #159, LAND O LAKES, FL 34638	
			Add
			□ Remove
			Change
			□ Remove
			Change
			Add
			Remove
			Change
			Add
			Remove
			☐ Change

If on	nending any other information, enter change(s) bere: (Attach additional sheets, if necessary.)
Note	tive date, if other than the date of filing:
the re	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Date	may 28 2023
	Signifiant of a mostifier or authorized coprosentative of a member
	SCARLA MIMS
	Expeditor parasted manua of Square

Page 3 of 3 Filing Fee: \$25.00