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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
VC-BILITY	Y, LLC		
SUBJECT:	Name of Lim	ited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	LEON CZAMANSKI		
		Name of Person	
	VC-BILITY, LLC		
		Firm/Company	
	1317 EDGEWATER DR	¥7432	
	• • • • • • • • • • • • • • • • • • • •	Address	
	ORLANDO, FL. 32804		
	-	City/State and Zip Code	
	inkcentive00@gmail.com E-mail address: (to be used for future annual report no	tification)
For further information c	oncerning this matter, please c		
LEON CZAMANSKI		786 234 7432	
Name o	f Person	at () Area Code Dayti	me Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		Street Address: Registration S	ection
Division of C		Division of Co	
P.O. Box 632 Tallahassee, l		The Centre of	
i ananassee, i	FL 32314	2413 N. MON	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2023 AUG -7 AM 7: Gc VC -BILITY LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on $\frac{\text{MAY } 19,2023}{\text{MAY } 19,2023}$ and assigned Florida document number _________L23000249090 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and contain the words "Limited Liability Company." the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: N/A (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: N/A (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: N/A Name of New Registered Agent: N/A New Registered Office Address: Enter Florida street address ___, 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 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
MGR	SIMON CZAMANSKI	1317 EDGEWATER DR, #7432	= Add
		ORLANDO, FL 32804	□Remove
			□Change
			□Add
			Remove
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·			□Add
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Note: If the date inserted in	ate must be specific and cannot be prior to d	(optional) date of filing or more than 90 days after filing.) Pursuant to 605.02 le statutory filing requirements, this date will not be listed	207 (3) as the
the record specifies a delayed ecord is filed.	ffective date, but not an effective time.	e, at 12:01 a.m. on the earlier of: (b) The 90th day after the	he
Dated AUGUST 2	. 2023		
	July runcos;		
	Signature of a member or authorize	zed representative of a member	
	LEON CZAMANSKI		
	Typed or printed r	name of signee	