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## **COVER LETTER**

Registration Section
Division of Corporations

Ю:

, VALOF	R HC LLC		
	Name of Li	mited Liability Company	
he enclosed Articles	of Amendment and fee(s) are su	bmitted for filing.	
lease return all corre	spondence concerning this matte	r to the following:	
	Jason Morales		
		Name of Person	
	VALOR HC LLC		
		Firm/Company	
	1970 Farrington Drive		
		Address	
	Merritt Island, FL 32952		
	<del></del>	City/State and Zip Code	<del></del> _
	VALORHC1@GMAIL.CO		
	E-mail address:	(to be used for future annual report no	tification)
or further information	n concerning this matter, please of	rall:	
ason Morales		321 735-3532	
Name	e of Person		ne Telephone Number
nclosed is a check for	r the following amount:		
■ \$25.00 Filing Fee	□ \$30.00 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 Adda Registration Division of P.O. Box 63 Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, FI	rporations Tallahassee be Street, Suite 810

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

VALOR HC LLC

2023 007 30 71 7: 46

( <u>Nume of the Limited Linbilit</u> (A Florida	ty Company as it now appears on our records.) a Limited Liability Company)	. 4
The Articles of Organization for this Limited Liability Colorida document number <u>L23000334316</u>	Company were filed on 07/14/2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ited liability company here:	
The new name must be distinguishable and contain the words "Limi	ited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		<u></u>
	-	
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, <u>enter the</u>	name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	rinter i Torida street address	
	, 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.

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>l'itle</u>	<u>Name</u>	Address	Type of Action
Mgr	Orlando Cardenas-Valle	1970 Farrington Drive Merritt Island, FL 32952	<b>=</b> Add
			□Remove
			Change
			□Add
			□Remove
			□Change
<del></del>	<del></del>		□Add
			□Remove
			□Change
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ecoi	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 led.
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econ is fi	led.

Typed or printed name of signee