

L23000342271

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

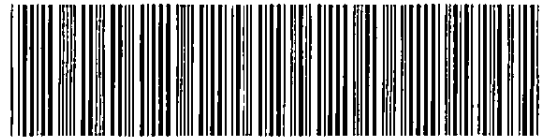
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Wmills

Office Use Only



300434841433

09/17/24--01006--005 \*\*50.00

RECEIVED

2024 SEP 17 AM 8:14

CLERK OF THE COURT  
HALL COUNTY, FLORIDA

2024 SEP 17 12:00

12:00

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: VIVACE ACCOUNTING SERVICES LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

DIANEL DIOGUER NUNEZ  
Name of Person

Firm/Company

1570 W 78th TERRACE  
Address

HIWALEAH, FL 33014  
City/State and Zip Code

MANAGEMENT@ITSVIVACETEAM.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

DIANEL DIOGUER at (786) 526-8839  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(additional copy is enclosed) |
|---|---|--|--|

**Mailing Address:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

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

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

IT'S VIVACE Music Academy AND More 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 07/19/2023 and assigned Florida document number L23000342271.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

IT'S VIVACE Expressive Therapy & More LLC  
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:**

**(Principal office address MUST BE A STREET ADDRESS)**

1570 W 78TH TERRACE  
HALEAH, FL 33014

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

1570 W 78TH TERRACE  
HALEAH, FL 33014

**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:**

**Name of New Registered Agent:**

DIANE L Dieguez Nunez

**New Registered Office Address:**

1570 W 78TH TERRACE, HALEAH  
Enter Florida street address

HALEAH

City

Florida

33014

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	DIANE L DINGUEZ NUNEZ	1570 W 78TH TERR, HIALEAH FL, 33014	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	ELIANNIS PEREZ MASTRA PA	1570 W 78TH TERR, HIALEAH FL, 33014	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	My Music Friend LLC	1430 SW 1ST, apt 606 MIAMI, FL, 33135	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
MGR	ELI'S MUSIC LLC	1430 SW 1ST, apt 606 MIAMI, FL, 33135	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

[illegible]

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Dated 09/17, 2024.

A handwritten signature in black ink, appearing to be "J.D." or similar, located at the bottom right of the page.

Signature of a member or authorized representative of a member

DIANEL DIEBUEZ NUÑEZ

Typed or printed name of signee

**Filing Fee: \$25.00**