123000419028

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2023 HOV 14 PH 2: 55

COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

	Amendment and fee(s) are sub	omitted for filing.			
Please return all correspor	dence concerning this matter				
		to the following:			
	Maria Tonante				
	Name of Person				
	Duronia Corp				
		Firm/Company			
	8390 West Flagler St Suite	: 102			
		Address		200 Si	
	Miami, Fl, 33144			73 HO	
		City/State and Zip Code			
	info@duronia.us			10 S	
For further information co	E-mail address: (neerning this matter, please co	to be used for future annual report notificall:	cation)	2023 HOV IL PH 2: 55 SEGUL MANGESTATE	
María Tonante		786 483-8181			
Name of	Person	at () Area Code Daytime	Telephone Number		
Enclosed is a check for the	2 following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	
Mailing Address: Registration Section Division of Corporations P.O. Box 6327		Street Address: Registration Sect Division of Corp The Centre of Ta	orations		

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vin-Chu LLC				
(<u>Name of the Limited Liabi</u> (A Florid	dity Company as it now appears on our records.) da Limited Liability Company)			
The Articles of Organization for this Limited Liability Clorida document number <u>L23000419028</u>	Company were filed on September 08th., 2023	and assigned		
this amendment is submitted to amend the following:				
A. If amending name, <u>enter the new name of the lin</u>	nited liability company here:			
N/A				
he new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the ab	breviation "L.L.C."		
Enter new principal offices address, if applicable:	N/A			
<u>Principal office address MUST BE A STREET ADD</u>	ORESS)			
Enter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	N/A	2023 NO		
 If amending the registered agent and/or registeregent and/or the new registered office address here: 	ed office address on our records, <u>enter the nam</u> :	P. P. S.		
Name of New Registered Agent: N/A				
New Registered Office Address:	Enter Florida street address			
	, Florida, 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:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Maria Tonante	8390 West Flagler St, Suite 102 Miami Fl,33144	■Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			Change Change Change Change Change Change Change Change Change Change
			☐ GHChange ☐ A G
			□Change
	·		□Add
			□Remove
			□Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) E. Effective date, if other than the date of filing: (optional)
(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) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. 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. 2023 Signature of a member or authorized representative of a member Maria Tonante Typed or printed name of signee

Filing Fee: \$25.00