# 623000436396

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TO:		gistration	Section Sections		•
SUBJ	ECT;		VZA INTERIO	ORS LLC Name of Limited Liability Company	
The en	iclosed	d Articles o	of Amendmen	it and fee(s) are submitted for filing.	
Please	return	all corres	pondence con	cerning this matter to the following:	

BETTINA MONTES

Name of Person

BMCE PROFESSIONAL SERVICES LLC

Firm/Company

7726 WINEGARD RD 2ND FLOOR

Address

ORLANDO FLORIDA 32809

City/State and Zip Code

empresasbmce@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

 Bettina Montes
 786
 2812065

 Name of Person
 Area Code
 Daytime Telephone Number

Enclosed is a check for the following amount:

□ \$25.00 Filing Fee

S30.00 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) 1

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

#### TRADENZA INTERIORS 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 09/19/2023 and assigned Florida document number L23000436396

This amendment is submitted to amend the following:

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

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

#### Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:	2023 S
(Mailing address MAY BE A POST OFFICE BOX)	

B. If amending the registered agent and/or registered office address on our records, <u>enter the name of the new registered</u> agent and/or the new registered office address here:

Name of New Registered Agent:	BMCE PROFESSIONAL SEF	RVICES LLC
New Registered Office Address:	7726 WINEGARD RD 2ND I	FLOOR
	Enter	Florida street address
	ORLANDO	, Florida
	City	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

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Title	<u>Name</u>	Address	Type of Action
MGR	ISABELA JAVIER FELIX	2130 LAURELWOOD WAY	🗆 Add
		WINTER PARK , FL 32792	<b>■</b> Remove
			□Change
			□Add
			🗆 Add
			🗇 Remove
			D∨⊡
			□Add
			🗆 Add
			Change

LOADED IN THE ANNEXED PDF SINCE IT WAS SCANNED BY CUTTING THE INFORMATION

OF THE ORGANIZATION NUMBER, DATE OF CONSTITUTION.

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E. Effective date, if other than the date of filing: <u>10119</u> <u>10000</u> (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) <u>Note:</u> 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.

Dated	
	Signifure of a member or authorized representative of a member Katheune AS Man. Typed or printed name of signee