L23000440475

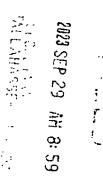
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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

VNF LLC SUBJECT:			
SOBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Varun Patel		
		Name of Person	
	VNF LLC		
		Firm/Company	
	3315 Anchor Bay Trail		
		Address	
	Bradenton FL 34211		
		City/State and Zip Code	
	varuncp@gmail.com		
	E-mail address: (to be used for future annual repo	rt notification)
For further information e	oncerning this matter, please e	all:	
Varun Patel		631 747-37	77
Name of Person		Area Code D	baytime 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	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres Registration S		<u>Street Addre</u> Registratio	
Division of C			Corporations
P.O. Box 632			of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VNF LLC	
(<u>Name of the Limited Liabili</u> (A Florida	ity Company as it now appears on our records.) a Limited Liability Company)
The Articles of Organization for this Limited Liability C Florida document number <u>L23000440475</u>	Company were filed on 09/21/2023 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lim	nited liability company here:
The new name must be distinguishable and contain the words "Lim	nited Liability Company," the designation "LLC" of the abbreviation "L.L.C."
The new hatte must be distinguishable and contain the words. Em-	med Elatolity Company. the designation BEC of the doore visition Electric
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDI	RESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	2023 SEP 29
B. If amending the registered agent and/or registered agent and/or the new registered office address here:	d office address on our records, enter the name of the new register
Manage & Name Description of Assert	
Name of New Registered Agent: New Registered Office Address:	Enty Florida street address
	, Florida
	City Zip Code
New Registered Agent's Signature, if changing Registere	d Agent
provisions of all statutes relative to the proper and c accept the obligations of my position as registered a	and agree to act in this capacity. I further agree to comply with the complete performance of my duties, and I am familiar with and gent as provided for in Chapter 605. F.S. Or, if this document is ed office address, I hereby confirm that the limited liability
	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>	Type of Action
MGR	Varun Patel	3315 Anchor Bay Trail	■Add
		Bradenton FL 34211	□Remove
			□Change
			□Remove
			□Change
			□Add
			□ Remove
			Change
			
			Remove
			☐ Change
			□ Add
			□Remove
			Change
			□ Add
			□Remove
			□Change

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an effective date is listed ote: If the date inser	er than the date of fili I, the date must be specific a ted in this block does no ate on the Department o	and cannot be prior to it meet the applicat			filing.) Pur		
record specifies a dela is filed.	ayed effective date, but n	oot an effective tim	e, at 12:01 a.m. on t	he earlier of: (b)) The 90i	th day af	ier the
nted 09/2	26/2023						
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