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05/06/24--01019--001 *#25.00



COVER LETTER

TO:

Registration Section

Div	ision of Corp	porations		
	VISTA MA	RBELLA PROPERTIES LLC		
SUBJECT:		Name of Lim	ted Liability Company	
The enclosed	f Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		MARIBELLA VIEYRA L	OPEZ	
			Name of Person	· · · · · · · · · · · · · · · · · · ·
			Firm/Company	
		1201 EDISON AVE		
			Address	
		LEHIGH ACRES, FL, 339	72	
		maribellavieyra83@gmail.e		
			to be used for future annual report no	otification)
For further is	nformation co	oncerning this matter, please ca	all:	
MARIBELL	A VIEYRA	LOPEZ	786 6196464 at ()	
	Name o	f Person	Area Code Dayti	me Telephone Number
Enclosed is	a check for th	ne following amount:		
≅ \$25.00 l	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)
	illing Addres		Street Address: Registration S	
	vision of C D. Box 632	orporations	Division of Co The Centre of	-
	llahassee, I			roe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VISTA MARBELLA PROPIERTIES LLC	
(Name of the Limited Liability Company as (A Florida Limited Liability	<u>it now appears од our records.</u>) ty Company)
The Articles of Organization for this Limited Liability Company were	filed on 04/16/2024 and assigned
Florida document number L23000441108	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability of	company here:
VIEYRA CARPENTER AND MORE LLC	
The new name must be distinguishable and contain the words "Limited Liability Co	mpany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
	024
	024 HAY
P. A	
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	• • • • • • • • • • • • • • • • • • • •
	(20
B. If amending the registered agent and/or registered office address agent and/or the new registered office address here:	ess on our records, <u>enter the mee of the new regi</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, 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 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
			□Add
			Remove
			□Change
			□ Add
		<u></u>	□ Remove
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Effective date, if other than the fan effective date is listed, the date mus Note: If the date inserted in this bl document's effective date on the Defective date.	ock does no	t meet the app	plicable statut	iling or more th ory filing req	(optic an 90 days after uirements, this	onal) filing.) Pursuant date will not b	to 605,0207 (be listed as t
e record specifies a delayed effectived is filed.	e date, but n	iot an effectiv	e time, at 12:	01 a.m. on th	e earlier of: (b) The 90th da	y after the
Dated APRIL 29		2024	·				
	Nicy	a member or a	uthorized renn	escntative of a	nember		_
	~.D		u		***		
MARIBELLA VIEYRA							

 $(\mathbf{r}_{i}, \mathbf{r}_{i}) = (\mathbf{r}_{i}, \mathbf{r}_{i}) + (\mathbf{r}_{i}, \mathbf{r}_{i}) + (\mathbf{r}_{i}, \mathbf{r}_{i}) + (\mathbf{r}_{i}, \mathbf{r}_{i})$

Filing Fee: \$25.00