## L33000449690

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DIVISION OF CORPORATIONS
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## **COVER LETTER**

TO:	Registration Sect Division of Corpo		•		<b>\</b>
SUBJE	c <del>i</del> : <u>Ne</u> v		ng rehovation ited Liability Company	s'llc	
The enc	dosed Anicles of A	mendment and fee(s) are sub	mitted for filing		
Please 1	return all correspon	dence concerning this matter	to the following:		
		_Edith	ESPINOSA Name of Person		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·	DIVISI 7023
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		ed: tho283 E-mail address: (	to be used for future annual report noti	lication)	ібке 24
For furt	her information cor	neerning this matter, please co	all:		
Ed	Name of I	SPINOSA Pason	at <u>4863</u> 242 Area Code Daytim	- 7689 e Telephone Number	_
Enclose	d is a check for the	following amount:			
□ \$25	5,00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing I Certificate of Certified Copy (additional copy)	Status &
	Mailing Address: Registration Se		Street Address: Registration Se	ction	
	Division of Co		Division of Cor		
	P.O. Box 6327		The Centre of T	·='	
	Tallahaccee FI	32314	2415 N. Monro	e Street Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Comps (A Florida Limited)	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L23000449690</u>	were filed on 9-28-2023 and assigned	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	pility company here:	
V&E New beginning rev The new name must be distinguishable and contain the words Limited Liabi	10 VC(+10Y) S LLC ility Company," the designation "L.L.C."	-
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)	2021	<u>.</u>
	000 See See See See See See See See See	_
	1	
Enter new mailing address, if applicable:		· ·
Mailing address MAY BE A POST OFFICE BOX)	<u>-</u> 영상 	· —
	2	
3. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new regis	<u>itere</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
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	Signature of	t a member or auti	ionzen representa	uve of a member		