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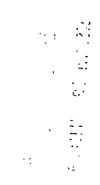
(Re	equestor's Name)	
(Ac	ddress)	
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(Ci	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
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(Do	ocument Number)	
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COVER LETTER

Tallahassee, FL 32314

TO: Registration So Division of Cor			
Vista Prem	nier Estate Partner, LLC		
SUBJECT:	nier Estate Partner, LLC Name of Lin	nited Liability Company	<u> </u>
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Irvine Headley		
		Name of Person	
	Vista Premier Estate Partn	ers, LLC	
		Firm/Company	
	14034 Avenue of the Grov	res	
		Address	
	Winter Garden, FL 34787		
		City/State and Zip Code	
	Irvine.Headley@gmail.com	to be used for future annual report notif	(ication)
For further information of	concerning this matter, please e		incution)
Irvine Headley		786 302-9344	
Name o	of Person	at ()	e Telephone Number
Enclosed is a check for t	he 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		Street Address:	
Registration : Division of C		Registration Sec Division of Cor	
P.O. Box 632		The Centre of T	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vista Premier Estate Partner, LLC		
(<u>Name of the Limited Liabil</u> (A Florid	lity Company as it now appears on our records la Limited Liability Company)	<u>r</u>)
The Articles of Organization for this Limited Liability (Florida document number L24000008944	Company were filed on January 3, 2024	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:	
Vista Premier Estate Partners, LLC		
The new name must be distinguishable and contain the words "Lir	nited Liability Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADD	RESS)	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registere	ed office address on our records, enter t	the name of the new regis
gent and/or the new registered office address here:		. 0
		;
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		1 2.1
New Registered Office Address.	Enter Florida street address	
	Flo	rida

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
			□Add
			□Remove
			□ Change
			□Add
			□Remove
			□Сһапде
			□Add
			□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			□Remove
			□Change
			□Remove
			` □Change

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

<u> </u>	
	X

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 sta	tutory 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	January 11	2024
		TH 02
		Signature of a member or authorized representative of a member
	Irvine He	radley
		Typed or printed name of signee

Filing Fee: \$25.00