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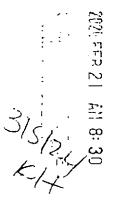
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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: VID2 Holdings LLC.  Name of Limited Cability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.  Please return all correspondence concerning this matter to the following:
rease return an correspondence concerning this matter to the following:
Michael F. Kayusa P.A.
Michael F. Hayusa, Esq.
2077 First Street Ste. 201
Fort Mycrs, Fl 33901
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
For further information concerning this matter, please call:  MICHAEL AGE  at (239) 334-8200  Name of Person  Name of Person  Daytime Telephone Number
<u>고</u> :
Enclosed is a check for the following amount:
□ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee. □ \$60.0

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

(Name of the Limited Liability Compa) (A Florida Limited L	ny as it now appears on our records.)		
The Articles of Organization for this Limited Liability Company Florida document number 2400078160.	1 1	and assign	ed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabi	lity company here:		
The new name must be distinguishable and contain the words "Limited Liability or the contain the conta	ity Company," the designation "LLC" or the al	obreviation "L.L.C	,,,
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			<del></del>
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, enter the nam	ne of the new re	gistered
Name of New Registered Agent:		<u> 2</u>	, , , , , , , , , , , , , , , , , , ,
New Registered Office Address:			4 4
	Enter Florida street address	, ü	
		. <u> </u>	, ··
	1 117	Zin Cada	

## 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.

MGR = M $AMBR = A$	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	3BV Holdings L	LC. 1375 Jackson Street	L <b>X</b> Add
	v	LC. 1375 Jackson Street #406 Ft. Myers, F13	3901 DRemove
			□Change
MGR	Veloz, William	1375 Jackson Stree	± □Add
		#406 Ft. Myers, FT 3390	) SRemove
			□Change
MBR.	Johnson, Bri Han	y 1375 Jackson Street	□Ađd
		#406 Ft. Myers FT .3390	∏ □Remove
			Change
		·	□ <b>Vg</b> q
			□ Remove ;
			Ω □Change
			🖸 Add
			□Remove
			□Change
			□Add
			□Remove
			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:

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ffective date, if other t	han the date of fili	ng:	(0	ptional)
	" " " " " OTOCK GOES HUI	. IIICCI INC ANDINCANIE CIA	DITOR! HISBY PARISHAM ASS.	ptional)  after filing.) Pursuant to 605.0207 ( this date will not be listed as t
ocument's effective date	on the Department of	State's records.	, , , , , , , , , , , , , , , , , , , ,	. ω
record specifies a delayed	effective date, but no	ot on affective times as t	2.01	
is filed.	directive date, but it	or an effective time, at 1	2:01 a.m. on the earlier of	(b) The 90th day after the
02 / 16 / 2024	ļ			
		Butter John		
	Signature of a	member or nuthorized re-	resentative of a member	
	Orginature of a	ee. of addiolized le	resentative of a member	

Filing Fee: \$25.00