

To:

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2024-06-12 08:21:22 UTC+14

18506176383

From: ZenBusiness User

H24000204178 3

Florida Department of State  
 Division of Corporations  
 Electronic Filing Cover Sheet

L240002041783

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To:  
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 Fax Number : (850)617-6383

From:  
 Account Name : ZENBUSINESS INC.  
 Account Number : I20230000190  
 Phone : (844)449-3624  
 Fax Number : (512)597-0678

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

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 DIVISION OF CORPORATIONS  
 TALLAHASSEE, FLORIDA

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**VICTORIAGOODS LLC**

Certificate of Status	0
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T. LEMIEUX

JUN 12 2024

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

H24000204178 3

VictoriaGoods LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on May 30, 2024 and assigned Florida document number L2400024441.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

9007 Murano Mews Ct

**(Principal office address MUST BE A STREET ADDRESS)**

Kissimmee, FL 34747-1912

Enter new mailing address, if applicable:

9007 Murano Mews Ct

**(Mailing address MAY BE A POST OFFICE BOX)**

Kissimmee, FL 34747-1912

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent: \_\_\_\_\_

New Registered Office Address: \_\_\_\_\_

*Enter Florida street address*

*City*

*Florida*

*Zip Code*

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JUN 11 PM 12:19  
18

**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 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:

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MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Cristel Caterine Lozada	9007 Murano Mews Ct Kissimmee, FL 34747	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

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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 statutory 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 June 11th 2024

/s/ Cristel Caterine Lozada  
\_\_\_\_\_ Signature of a member or authorized representative of a member

Cristel Caterine Lozada, Member  
\_\_\_\_\_ Typed or printed name of signee