L24000512618

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J 7/30/2024

COVER LETTER

TO: Registration : Division of Co	Section orporations		
SUBJECT:	VIVID Manage Name of Li	ement LLC mited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.	
Please return all corresp	ondence concerning this matte	er to the following:	
	Gregory st	For+ Name of Person	
	Vivid Mar	agement LLC Fimi/Company	
	1648 NE 15	8 th 5+	
	North Migmi	Beach, FL 331 City/State and Zip Code	62
	GSt-Fort0906 E-mail address:	Omail. Com to be used for future annual report noti	fication)
For further information of	concerning this matter, please c		
Gregory St	Fort of Person	at (754) 201-0	2361 e Telephone Number
		Theo code Traytain	c relephone (vumber
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 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

Cover Letter

Gregory St. Fort

Ph# 754-801-0361

Return Address: 1648 NE 158+h St.

North Miami Beach, Fl. 33162

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

<u>Vivid</u> Managen	nent LLC 2024 2" 28 PX 5:50
(<u>Name of the Limited Piabi</u> (A Flori	Ment LLC ility Company as it now appears on our records.) da Limited Liability Company)
The Articles of Organization for this Limited Liability Florida document number <u>L24000312618</u>	Company were filed on July 15, 2024 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Lin	mited 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)	
B. If amending the registered agent and/or registere agent and/or the new registered office address here:	ed office address on our records, <u>enter the name of the new registered</u>
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Florida
Ann D. Co., Land J. Co.	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 of removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Gregory stfort	1648 NE 158th St	ZAdd
		North Miami Beach, FL 3	3162 □Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
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			□ Change
			□Add
			□Remove
			□Change

	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
•		
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an ell	e date, if other than the date of filing:	207 /
Ott.	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed it's effective date on the Department of State's records.	last
recor is fil	specifies a delayed effective date, but not an effective time, at $12:01$ a.m. on the earlier of; (b) The 90th day after t.	he
nted	July 15 2024	
	Signification of a member of authorized representative of a member	
	Gregory T. St. Fort Typed or printed name of signee	