

L24000319513

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SECTION SEED THE

COVER LETTER

IU:	Registration Se Division of Cor			
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SUBJE	CT:	PERTY MANAGEMENT LLC		
		Name of Lim	ited Liability Company	
The enc	losed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please r	eturn all correspo	ondence concerning this matter	to the following:	
		VERNON BURROUGHS		
			Name of Person	
		VTB PROPERTY MANA	GEMENT LLC	
			Firm/Company	
		3974 NW 19TH STREET		
			Address	
		LAUDERHILL, FL 33311		
			City/State and Zip Code	
		VERNONBURROUGHS58	8@GMAIL.COM to be used for future annual report notif	igation
For furt	her information c	oncerning this matter, please c		leanony
	ON BURROUGH		954 469-5935	
VERN		f Person	at ()	: Telephone Number
	Name o	Person	Area Code Daytime	Telephone Number
Enclose	d is a check for th	ne following amount:		
■ \$25	.00 Filing Fee	S30.00 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)
	Malling Add		Saa A J.J	
	Mailing Address Registration S		Street Address: Registration Sec	tion
	Division of C		Division of Com	

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 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

VIB PROPERTY MANAGEME		
(Name of the Lim	ited Liability Company as it now appears (A Florida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited I		3/2024 and assigned
Florida document number L24000319513	·	
This amendment is submitted to amend the fol	lowing:	
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 desi	gnation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	202 ₁
		C 2
Enter new mailing address, if applicable:		AS. 0
Mailing address MAY BE A POST OFFICE	BOX)	MA P II
		77.
B. If amending the registered agent and/or	registered office address on our rec	ords, enter the name of the new registere
agent and/or the new registered office addre	ess here:	
Name of New Registered Agent:	VERNON T BURROUGHS	
New Registered Office Address:	3974 NW 19TH STREET	
	Enter Florida	street address
	LAUDERHILL	, Florida ³³³¹¹
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

ALTE DE CHEREEN A CANA OFF COMMENT A

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 duttes, 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
MGR	BURROUGHS, VERNON	3974 NW 19TH STREET	\extstyle Add
		LAUDERHILL, FL 33311	□Remove
			Change
			□Add
			□Remove
			□Change
-			□Add
			□ Remove
			□Add
			□ Remove
			□Change
		 	DbA
			□Remove
			Change
			⊡Add
			□Remove
			[]Change

fective date, if other than the date of filing:							
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Filing Fee: \$25.00