From:

10/17/24, 11:09 AM



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To:

Division of Corporations

Page: 2 of 5

Fax Number : (850)617-6383

From:

Account Name : VP ACCOUNTING AND SERVICES LLC

Account Number : I20240000138 Phone : (786)518-0497

Fax Number : (786)667-5135

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

Email Address: INFO@VPAACONSULTING.COM

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Help

ARTICLES OF AMENDMENT OT ARTICLES OF ORGANIZATION OF

Page: 3 of 5

CUSTOMER SOLUTIONS AND SERVICES LLC	•	
(Name of the Limited Liability Con (A Florida Limite	ipany as it now appears on our reco ed Liability Company)	<u>ги̂ъ.)</u>
The Articles of Organization for this Limited Liability Compa Florida document number <u>L24000369351</u>	ny were filed on 08-22/2024	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited li	ability company here:	
The new name must be distinguishable and contain the words "Limited La	ability Company," the designation "LI	.C" or the abbreviation "L.U.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) B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	e address on our records, ente	The name of topics registered
New Registered Office Address:	Enter Florida street addi	
A DE TO THE TO SELECT THE TOTAL SELECT THE THE TOTAL SELECT THE TOTAL SELECT THE TOTAL SELECT THE TOTAL SELE	Chy-	ToridaZip Code
New Registered Agent's Signature, if changing Registered Agen	<u>nt:</u>	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a heing filed to merely reflect a change in the registered officempany has been notified in writing of this change.	ite performance of my duties, i is provided for in Chapter 605	and Lam familiar with and . F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

To: Division of Condorations Page: 4 of 5 2024-10-17 15:36:40 GMT 17866675135

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

From:

MGR = Manager AMBR = Authorized Member

<u>Tide</u>	Name	Address	Type of Action
AMBR	ADRIANA ABREU	8250 NW 27TH ST UNIT 309	≅ Add
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