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COVER LETTER

VENEC, LLC				
Name of Lim	ited Liability Company			
Amendment and fee(s) are sub	mitted for filing.			
ndence concerning this matter	to the following:			
Andrew L. Mann, Esq.				
	Name of Person			
Mann Wolf Plyler LLP				
	Firm/Company			
7800 W. Oakland Park Blvd., Suite B-104			2022 SECI	
Address				* (
Sunrise, FL 33351			127 ±	remanda A
andrew@mannwell.com	City/State and Zip Code] ا ا ا انتخاب ا المنعد الأ
	to be used for future annual report notif	ication)		
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	954 572-9944			
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s: Section orporations	Division of Cor	porations		\
	Name of Lim Amendment and fee(s) are sub Indence concerning this matter Andrew L. Mann, Esq. Mann Wolf Plyler LLP 7800 W. Oakland Park Bly Sunrise, FL 33351 andrew@mannwolf.com E-mail address: (oncerning this matter, please can f Person f Person are following amount: S30.00 Filing Fee & Certificate of Status Section orporations	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Andrew L. Mann, Esq. Name of Person Mann Wolf Plyler LLP Firm/Company 7800 W. Oakland Park Blvd., Suite B-104 Address Sunrise, FL 33351 City/State and Zip Code andrew@mannwolf.com E-mail address: (to be used for future annual report notify to the state of Status and Certified Copy (additional copy is enclosed) Street Address: Section Orporations Street Address: Registration Sector of Corporations Street Address: Registration Sector of Corporations	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Andrew L. Mann, Esq. Name of Person Mann Wolf Plyler LLP Firm/Company 7800 W. Oakland Park Blvd., Suite B-104 Address Sunrise, FL 33351 City/State and Zip Code andrew@mannwolf.com E-mail address: (to be used for future annual report notification) oncerning this matter, please call: 1	Amendment and fee(s) are submitted for filing. Indence concerning this matter to the following: Andrew L. Mann, Esq. Name of Person Mann Wolf Plyler LLP Firm/Company 7800 W. Oakland Park Blvd., Suite B-104 Address Sunrise, FL 33351 City/State and Zip Code andrew@mannwolf.com E-mail address: (to be used for future annual report notification) Temporal Company 1

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

SUNRISE VENEC, LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our recor Liability Company)	<u>ds.</u>)
The Articles of Organization for this Limited Liability Company	y were filed on 4/07/2003	and assigned
Torida document number L03000012461		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lial	bility company here:	
he new name must be distinguishable and contain the words "Limited Liab	ility Company," the designation "LLG	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
Principal office address MUST BE A STREET ADDRESS)		72 - TO 22 - T
		(2) = 1 (a.c.)
Inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		<u> </u>
		<u> </u>
B. If amending the registered agent and/or registered office gent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter	r the name of the new registe
New Registered Office Address:	Enter Florida street addre	
	v.nier v ioriaa street addre	30
		lorida
	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, <u>enter the title, name, and address of each person_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MAYRA DUGARTE	4623 W. LOWELL AVE., TAMPA FL 33629	□Add
			Remove
			□Change
			□Add
			□Remove
			ST-CRE STA
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