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COVER LETTER . . .

TO:

ΓΟ: Registration Se Division of Cor				
Venesur, L. SUBJECT: 2003 UCC	LC.			
SUBJECT: Trivia	Name of Lim	ited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Jesus E Rivera			
	-	Name of Person		
	Venesur, LLC			
		Firm/Company		
	11310 S. Orange Blossom	Trail		
		Address		
	Orlando/FL 32837			
		City/State and Zip Code		
	E-mail address: (to be used for future annual report not	itication)	
For further information c	oncerning this matter, please c	all:		
Name o	f Person	at () Area Code Daytin	ne Telephone Number	
Enclosed is a check for the	ne following amount:			
S25.00 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		Street Address: Registration Section		
Division of Corporations		Division of Corporations		
P.O. Box 632	27	The Centre of	•	
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Venesur, LLC				
(Name of the Limited (A	Liability Compa Florida Limited 1	ny as it now appears on Liability Company)	our records.)	
The Articles of Organization for this Limited Liab florida document number L09000075593	ility Company	were filed on $\frac{08/06/2}{}$	2009	and assigned
his amendment is submitted to amend the follow	ing:			
If amending name, enter the new name of th	<u>ie limited liab</u>	ility company here:		
he new name must be distinguishable and contain the word	ls "Limited Liabil	lity Company," the design	nation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		11310 S ORANGE	BLOSSOM TRAI	L STE 113
Principal office address MUST BE A STREET ADDRESS)		ORLANDO, FL 328	₹37	
nter new mailing address, if applicable:				2070 NOV 12
Aailing address MAY BE A POST OFFICE BO				PH 1: 28
. If amending the registered agent and/or registered affice address l	istered office a here:	address on our recoi	rds, <u>enter the na</u>	ime of the new registe
Name of New Registered Agent:	JESUS E RIVE	RA		
New Registered Office Address: 11310 S ORANGE BLOSSOM TRAIL STE 1				
		Enter Florida s	street address	
	ORLANDO		, Florida	32837
		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 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>	<u>Address</u> .	Type of Action
MGR	GIANNOTTI, MARCOS D	4450 LAKE CALABAY DR, ORLANDO FL 32837	□Add
			= Remove
			□Change
MGR	RIVERA, JESUS E	11310 S ORANGE BLOSSOM TRAIL STE 113	DAdd
		ORLANDO, FL 32837	□Remove
			= Change
			□Add
			□Remove
			□Change
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