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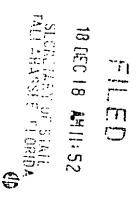
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COVER LETTER

то:	Registration Sec Division of Corp				
eun ie		VEL SERVICES, LLC			
SUBJE	C1:	Name of Lim	ited Liability Company		
The encl	losed Articles of a	Amendment and fee(s) are sub	mitted for filing.		
Please re	eturn all correspo	ndence concerning this matter	to the following:		
		GUILLERMO MARTINE	Z, CPA		
			Name of Person		
		FREUND KATZ GOLDS'	FON YOUNG, CPA PA		
			Firm/Company	<u> </u>	
10729 SW 104TH STREET					
			Address		
		MIAMI, FLORIDA 33176			
		GMARTINEZ@TAX-DOC	City/State and Zip Code CTOR.NET		
		E-mail address: (to be used for future annual report notif	ication)	
For furth	ner information co	oncerning this matter, please ca	all:		
GUILLI	ERMO MARTIN	EZ, CPA	at () 279-1288 Area Code Daytime	Telephone Number	
	Name of	Person	Area Code Daytime	Telephone Number	
Enclosed	d is a check for th	e 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/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ted Liability Compa (A Florida Limited I	ny as it now appears on our Liability Company)	records.)			
iability Company	were filed on $\frac{02-09-2011}{}$	- 	ar	ıd assi	gned
owing:					
f the limited liab	ility company here:				
vords "Limited Liabil	lity Company," the designation	"LLC" or the	abbreviati	on "L.I.	C."
cable:	40 NW 87TH AVENUE	UNIT D202			
ET ADDRESS)	MIAMI, FLORIDA 331	72	Σς:		
	MIAMI, FLORIDA 331	72	CRUSHY BOARDA, A CORDA, the n	DEC 18 AS 11: 52 me	of the nev
GIOVANNI DI	MAGGIO	<u> </u>			
40 NW 87TH A			•••		
N/14841	Enter Florida street		22177		
WIIAWII	City	, Florida <u>'</u>	Zip	Code	
	ted Liability Compa (A Florida Limited I Liability Company Liability Company owing: of the limited liab words "Limited Liabil cable: ET ADDRESS) /or registered of ffice address here GIOVANNI Di	ted Liability Company as it now appears on our (A Florida Limited Liability Company) Liability Company were filed on 02-09-2011 owing: owing: of the limited liability company here: words "Limited Liability Company." the designation 40 NW 87TH AVENUE ET ADDRESS) 40 NW 87TH AVENUE MIAMI, FLORIDA 331 40 NW 87TH AVENUE MIAMI, FLORIDA 331 /or registered office address on our reffice address here: GIOVANNI DI MAGGIO 40 NW 87TH AVENUE UNIT D202 Enter Florida street MIAMI	ted Liability Company as it now appears on our records.) (A Florida Limited Liability Company) Liability Company were filed on 02-09-2011 owing: If the limited liability company here: words "Limited Liability Company." the designation "LLC" or the eable: 40 NW 87TH AVENUE UNIT D202 MIAMI. FLORIDA 33172 40 NW 87TH AVENUE UNIT D202 MIAMI, FLORIDA 33172 /or registered office address on our records, enterfice address here: GIOVANNI DI MAGGIO 40 NW 87TH AVENUE UNIT D202 Enter Florida street address MIAMI , Florida , Florida	A company as it now appears on our records. (A Florida Limited Liability Company) (B Company were filed on 02-09-2011 arguments) (A Florida Limited Liability Company here: (A Company here: (A O NW 87TH AVENUE UNIT D202 (B COMPANY) (A O NW 87TH AVENUE UNIT D202 (A O NW 87TH AVENUE UNIT D202 (A O NW 87TH AVENUE UNIT D202 (B O NW 8	A cowing: In the limited Liability Company were filed on our records. In the limited Liability Company here: In the limited

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

Page 1 of 3

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	GIOSTAR	60 WEST 51 TERRACE	
		MIAMI BEACH, FL. 33140	Add
			Remove
	GIOSTAR, CORP	10729 SW 104TH STREET	□ Change
MGR			Add
		MIAMI, FLORIDA 33176	
			C Remove
			Change
			□_Add
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E. Effective date, if other than the date of filing:	iling.) Pursu	ant to 605.0207 (3 of be listed as th
f the record specifies a delayed effective date, but not an effective time, at 12:01 a.db). The 90th day after the record is filed.	m. on th	e earlier of:
Dated DECEMBER 10 , 2018		
Signature of a member or authorized representative of a member	· · · · -	

Page 3 of 3

Filing Fee: \$25.00

Typed or printed name of signee