LII 0000 15772

(Requ	estor's Name)	
(Addre	ess)	
(Addr	ess)	
(City/s	State/Zip/Phon	e #)
PICK-UP	WAIT	MAIL
(Busin	ness Entity Nai	me)
(Docu	rment Number)	
Certified Copies	Certificate	s of Status
Special Instructions to Fil	ling Officer:	

Office Use Only



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COVER LETTER

	Registration So Division of Cor			
SUBJEC'		ESOURCES LLC		
SUBJEC	1;	Name of Lim	ited Liability Company	
		Amendment and fee(s) are sub	-	
		James D'Loughy, Attorney	-in-Fact	
		Advisorlaw PLLC	Name of Person	
		2925 PGA Boulevard, Ste	Firm/Company 204	
		Palm Beach Gardens, Flori	Address ida 33410	
		jdloughy@advisorlaw.com	City/State and Zip Code	
For furthe	r information c	E-mail address: (oncerning this matter, please or	to be used for future annual report notif	ication)
		ttorney-in-Fact	561 622-7788	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed	is a check for th	ne following amount:		
■ \$25.00	0 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

STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VALEO RESOURCES LLC		
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	T TO THE
The Articles of Organization for this Limited Liab Florida document number L11000075772		and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of the	he limited liability company here:	
<u> </u>		
The new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or t	the abbreviation "L.L.C."
Enter new principal offices address, if applicab	de:	
(Principal office address MUST BE A STREET	ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our records, <u>er</u> <u>ee address here</u> :	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florid	a
		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, 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	Devaleix, Louis C	1645 Palm Beach Lakes Blvd STE 1010	
		West Palm Beach, FL 33401	
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fective date, if other that n effective date is listed, the dat ote: If the date inserted in the cument's effective date on the	e must be specific and can tis block does not meet	not be prior to date of the the applicable statut	iling or more than 90 da	(optional) ys after filing.) Pursuant ts, this date will not b	to 605.0201 e listed as
record specifies a del The 90th day after the	ayed effective date record is filed.	e, but not an effe	ective time, at 12	:01 a.m. on the e	earlier o
September 13	2	019			
		() ()	L 3		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00