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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT:	URIECT: VENETOOL LIMITED LIABILITY COMPANY			
SUBJECT:		ited Liability Company	· · · · · · · · · · · · · · · · · · ·	
	of Amendment and fee(s) are su	-		
Please return all corre	spondence concerning this matte	r to the following:		
		Antonio Regojo		
		Name of Person		
	Firm/Company			
	880 NE 69 St #14L			
		Address		
	 	Miami, FL 33138 City/State and Zip Code		
	F-mail address: (aregojo@gmail.com (to be used for future annual report notifica	ation)	
For further information	on concerning this matter, please	•		
	Antonio Regojo	ar (14-8299	
Name of Person		Area Code & Daytime Telephone Number		
Enclosed is a check fe	or the 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)	
Reg Div P.O	ision of Corporations Box 6327 Shahassee, FL 32314	STREET/COURIE Registration Section Division of Corporat Clifton Building 2661 Executive Cent Tallahassee, FL 3230	ions - er Circle	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VENETOOL LIMITED LIABILITY COMPANY

(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	iny as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document numberL11000077121	were filed onJuly 5, 2011	and assigned	
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	oility company here:		
The new name must be distinguishable and end with the words "Lim" L.L.C."	ited Liability Company," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable:	Av Principal Las Palmas Casa	a No. 26	
(Principal office address MUST BE A STREET ADDRESS)	Urb: La Florida	544	
	Caracas, 1050. Venezuela	Fig F	
Enter new mailing address, if applicable:		COLUMN TO THE PARTY OF THE PART	
(Mailing address MAY BE A POST OFFICE BOX)		Ma B L	
		<u> </u>	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	*	the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	. Florida		
	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 608, 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 the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member **Type of Action Title** <u>Name</u> **Address** Add Remove ☐ Add Remove ☐ Add Remove Add Remove ∐Add Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2011 Dated_ Signature of a member or authorized representative of a member

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Filing Fee: \$25.00