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PICK-UP	☐ WAIT	MAIL
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(Doi	cument Number)	
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Certified Copies	Certificates	of Status
Special Instructions to I	Eiling Officer	
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Office Use Only



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May 5, 2016

GISELLE A ALFONSO ALEMAN 848 BRICKELL ABE PH-3 MIAMI, FL 33131

SUBJECT: VEYSO INVESTMENTS, LLC

Ref. Number: L11000138277

We have received your document for VEYSO INVESTMENTS, LLC and your check(s) totaling \$60.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Letter Number: 116A00009447

Yasemin Y Sulker Regulatory Specialist II

www.sunbiz.org

## **COVER LETTER**

Divisio	on of Corp	orations		
LI SUBJECT:	LC AMEN	DMENT / RESTATE/ CORI	RECT OR M/MG RESIGN OF VI	EYSO INVESTMI
_	_	Name of Lim	ited Liability Company	
The enclosed A	rticles of A	mendment and fee(s) are sub	mitted for filing.	
Please return ali	l correspond	dence concerning this matter	to the following:	
		GISELLE A. ALFONSO A	ALEMAN	
			Name of Person	
		MGRM		
			Firm/Company	
		848 BRICKELL AVENUE	E, PH-3	
			Address	
		MIAMI, FL,33131		
			City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
		gisellealfonso7@gmail.com		
		E-mail address: (	to be used for future annual report not	ification)
For further infor	rmation con	cerning this matter, please ca	all:	
GISELLE A. A	LFONSO A	ALEMAN	786 385 6130	
	Name of F	erson	Area Code Daytin	ne Telephone Number
Enclosed is a ch	eck for the	following amount:		
□ \$25.00 Filin	ng 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:** 

TO:

**Registration Section** 

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

any as it now appears on our records.) Liability Company)	
y were filed on DECEMBER 8, 2011 and assigned	
bility company here:	
sility Company," the designation "LLC" or the abbreviation "L.L.C."	
5201 ALHAMBRA CIRCLE,	
CORAL GABLES, FL, 33146	
5201 ALHAMBRA CIRCLE,	
CORAL GABLES, FL, 33146	
office address on our records, enter the name of the re:	
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 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>	Address	Type of Action
MGRM	JOSE O FRAGA	848 BRICKELL AVE, PH-3, MIAI	
			■ Remove
		····	☐ Change
MGR	JOSE O FRAGA	848 BRICKELL AVE, PH-3, MIAI	□ Add
			■ Remove
			☐ Change
			□ Add
			□ Remove
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			C S7 □ Remove
			Change
			Add
			☐ Remove
			☐ Change

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Page 3 of 3

Filing Fee: \$25.00