

L13000004787

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : NEIMAN & INTERIAN, PLLC
Account Number : I20180000010
Phone : (305)530-9400
Fax Number : (305)530-9409

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18 AUG 21 PM 6:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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Email Address: agutierrez@niflalaw.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN VEROSALVI, LLC

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K. SALY
AUG 22 2018

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: VEROSALVI, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Alberto Interian

Name of Person

Neiman & Interian, PLLC

Firm/Company

2020 Ponce de Leon Blvd., Suite 1005 B

Address

Coral Gables, Florida 33134

City/State and Zip Code

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Alberto Interian

305 530-9400
at ()

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for 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)

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

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**ARTICLES OF AMENDMENT
 TO
 ARTICLES OF ORGANIZATION
 OF**

FILED
18 AUG 21 PM 6:00
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

VEROSALVI, LLC

(Name of the Limited Liability Company as it now appears on our records.)
 (A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on January 9, 2013 and assigned
 Florida document number L13000004787.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

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 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

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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>	<u>Type of Action</u>
MGR	Antonio P. Salvioli	8445 N.W. 33 Street	<input checked="" type="checkbox"/> Add
		Cooper City, FL 33024	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Doris Mata De Salvioli	8445 N.W. 33 Street	<input checked="" type="checkbox"/> Add
		Cooper City, FL 33024	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Veronica Salvioli	5311 S.W. 173 Avenue	<input type="checkbox"/> Add
		Miramar, FL 33029	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 TALLAHASSEE, FLORIDA

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