L1300009443

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COVER LETTER

TO:

Registration Section

Division of Corporations					
SUBJECT:	VEBEL CO	ONSULTING LLC			
SUBJECT:	Name of Limited Liability Company				
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	condence concerning this matter	to the following:			
	Jı	Julia Greenberg-Aguilar			
	Name of Person				
	MyUSAcorporation.com				
	Firm/Company				
	40 E	40 Exchange Place STE 1301			
		Now York NV 40005			
		New York, NY 10005 City/State and Zip Code			
	E-mail address: (1johnny@gmail.com to be used for future annual report notifice	ution)		
For further information	concerning this matter, please of				
Julia (Greenberg-Aguilar	at (_877) 3 Area Code & Daytime 7	30-2677		
Name	of Person	Area Code & Daytime	Felephone 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)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
MAILING ADDRESS: Registration Section		STREET/COURIE Registration Section			
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		Division of Corporations Clifton Building 2661 Executive Center Circle			

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VEBEL CONS			
(Name of the Limited Liability Compa (A Florida Limited L	iability Company)		
The Articles of Organization for this Limited Liability Company Florida document numberL13000029443	were filed on	02/25/2013	and HAR 18
This amendment is submitted to amend the following:			ED SOKPOR
A. If amending name, enter the new name of the limited liability company here:			HATE RATIONS
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Comp	any," the designation "LL	C" or the abbreviation
Enter new principal offices address, if applicable:	80 SW 8TH	STREET #2000	
(Principal office address MUST BE A STREET ADDRESS)	MIAMI, FL 3	3130	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	80 SW 8TH MIAMI, FL 3	STREET #2000 3130	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		our records, enter the	e name of the new
Name of New Registered Agent:	····		
New Registered Office Address:	E	nter Florida street addre	rss
		, 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Address Type of Action <u>Title</u> <u>Name</u> MGRM ☐ Add Remove ☐ Add Remove Remove ∏Add Remove \square Add ___Remove \square Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March, 11th 2013 Dated ___ Signature of member or authorized representative of a member Julia Greenberg-Aguilar - Authorized Representative Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00