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EXAMINITA

## **COVER LETTER**

TO: Registration Section Division of Corpo	
A.	VE Management LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Articles of Ar	nendment and fee(s) are submitted for filing.
Please return all correspond	ence concerning this matter to the following:
	Johanna Noguera
	Name of Person
	VE Management LLC
	Firm/Company
	1166 Kapp Dr.
	Address
	Clearwater / PL / 33765
	City/State and Zip Code  E-mail address: (to be used for future annual report notification)
	E-mail address: (to be used for future annual report notification)
For further information con-	cerning this matter, please call:
Johanna	Noguera at (797) 520 - 6475 Area Code & Daytime Telephone Number
Name of P	erson Area Code & Daytime Telephone Number
Enclosed is a check for the	following amount:
\$25.00 Filing Fee	□\$30.00 Filing Fee & □\$55.00 Filing Fee & □\$60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is enclosed)  □\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registrati Division o P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, 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

VE Managem	nent LLC
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company of Florida document number	were filed on September 4, 2013 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabil	lity company here:
The new name must be distinguishable and end with the words "Limite	ed Liability Company," the designation "LLC" or the abbreviation
"L.L.C."  Enter new principal offices address, if applicable:	2213 (
(Principal office address MUST BE A STREET ADDRESS)	The C
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	1166 Kapp Dr 33 Clearwater, 34 33765
B. If amending the registered agent and/or registered office address here	
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	. Florida
<del></del>	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 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

<u>Title</u>	<u>Name</u>	Address	Type of Action
<u>M6R</u>	Johanna Noguera	107 N. Bay Hilb Blud.	Add
		Safety Harbor, 74 34699	E Remove
			_
			Add
			Remove
			Add
		.Es	
		SSEC. J.	- B
		HASSEL FLOGID.	Add
			Remove
			- 
			Add
			. La Remove
			Add
			Remove

. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
ated	Oct. 4 2013
	Channat
	Signature of a member or authorized representative of a member  Johanna Noquera
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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Notes: my banking institution is asking me to have the Atticles of Organization for my LLC and also show the % of owner ship for me, Johanna Woguera, as a Registered Agent and manager.

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