L14 0000 20178

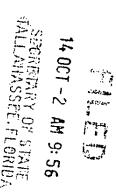
(Re	questor's Name)	
(Ad	dress)	
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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT: Vene	mac LLC		
SUBJECT:		ited Liability Company	,
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Zeid Abdulh	ay Ferrer	
		Name of Person	
	Venemac, L	LC	
		Firm/Company	
	3100 NW 72	2nd Ave. Unit 102	
	- 11 11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Address	**************************************
	Miami, FL 33	3122	
		City/State and Zip Code	
	zeidferrer@gmail	.COM to be used for future annual report notifica	ation)
For further information co	oncerning this matter, please ca	•	mon)
Zeid Abdull	<u> </u>	786, 219-51	82
Name of		at ()	elephone Number
Enclosed is a check for th	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Venemac, LLC			
(Name of the Limi	ited Liability Compa (A Florida Limited	ny as it now appears on our records.) Liability Company)	1
The Articles of Organization for this Limited L Florida document number <u>L14000020178</u>		were filed on 02/05/2014	and assigned
This amendment is submitted to amend the following	towing:		
A. If amending name, enter the new name of	of the limited liab	ility company here:	
N/A			
The new name must be distinguishable and end with the	e words "Limited Liab	oility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if appli-	cable:	N/A	
(Principal office address MUST BE A STRE	ET ADDRESS)	 	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	<u> </u>	N/A	
B. If amending the registered agent and registered agent and/or the new registered of	office address her	<u>e</u> :	enter the name of the new
Name of New Registered Agent:	Zeid Abdull	hay Ferrer	
New Registered Office Address:	10769 NW	80th Lane Enter Florida street address	SSN - 2
	Doral	. Flor	ida 331782
New Registered Agent's Signature, if changing	Registered Agent:	City	ida 331782 40 177
I hereby accept the appointment as register provisions of all statutes relative to the project.			

If Changing Registered Agent, Signature of New Registered Agent

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 amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member

Title	<u>Name</u>	Address	Type of Action
MGR	Ismael Emacha	2854 NW 72 Ave.	🗆 Add
		Miami, FL 33122	Remove
AMBR	Zeid Abdulhay Ferrer	10769 NW 80th Lane	= Add
		Doral, FL 33178	□ Remove
			□ Remove
			☐ Add ☐ SEND R
			ASSECTION AND A SSECTION AND A SSECTION AND A SCHOOL AND
			□ Add
			Remove

D. I	f amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	N/A
T)	Effective date, if other than the date of filing: (optional) The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)
E	Dated August 27 , 2014
	ALL HIS
	Signature of a member or authorized representative of a member
	Zeid Abdulhay Ferrer
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

14 OCT -2 AM 9:56 SECREMARY OF STATE