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COVER LETTER

TO:

Registration Section Division of Corporations

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:		
	EDWIN YOBANI AVILA	. PULIDO		
		Name of Person		
	Name of Limited Liability Company Dosed Articles of Amendment and fee(s) are submitted for filing. Turn all correspondence concerning this matter to the following: EDWIN YOBANI AVILA PULIDO Name of Person VENETO DECO USA LLC Firm/Company 11458 SW 237 TERRACE Address HOMESTEAD, FL 33032 City/State and Zip Code disacabados@yahox.cs E-mail address: (to be used for future annual reference information concerning this matter, please call: YOBANI AVILA PULIDO Name of Person Name of Person Take Area Code Street Address: Registration Section Street Address: Registration Section Street Address: Registration Section	.C		
		Firm/Company		
	enclosed Articles of Amendment and fee(s) are submitted for filing. see return all correspondence concerning this matter to the following: EDWIN YOBANI AVILA PULIDO Name of Person VENETO DECO USA LLC Firm/Company 11458 SW 237 TERRACE Address HOMESTEAD, FL 33032 City/State and Zip Code disacabados@yahoo.es E-mail address: (to be used for future annual report notification) further information concerning this matter, please call: WIN YOBANI AVILA PULIDO Name of Person Area Code Daytime Telephone Number 10sed is a check for the following amount: \$25.00 Filing Fee \$30.00 Filing Fee & Certified Copy (additional copy is enclosed)			
		Address		22
	HOMESTEAD, FL 33032			SEP 26
		City/State and Zip Code	Firm/Company Address State and Zip Code ed for future annual report notification) at (25
				<u> </u>
	E-mail address: (to be used for future annual report noti	fication)	بې
For further information c	oncerning this matter, please c	all:		8
EDWIN YOBANI AVIL	A PULIDO			
Name o	f Person		e Telephone Number	_
Enclosed is a check for the	ne following amount:			
□ \$25.00 Filing Fee		Certified Copy	Certificate of S Certified Copy	tatus &
			ction	
-		-		
P.O. Box 632	7			
Tallahassee, l	FL 32314	2415 N. Monro	e Street, Suite 810	

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ted Linbility Company (A Florida Limited Lia	y as it now appears on our rability Company)	records.)		
Liability Company w	vere filed on APR 28, 200	22	and assi	igned
lowing:				
of the limited liabili	ity company here:			
words "Limited Liability	y Company," the designation	"LLC" or the abbrev	iation "L.I	L.C."
cable:	11458 SW 237 TERRAC	E HOMESTEAD,	FL 33032	2
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11450 CW 227 T	EDDACE	•		
11436 3 W 237 L		address		
HOMESTEAD				
	City	_, Florida	Zip Code	
	lowing: of the limited liability cable: ET ADDRESS) registered office ad ess here: LINDA EMILSE	lowing: of the limited liability company here: overds "Limited Liability Company," the designation cable: 11458 SW 237 TERRACE ET ADDRESS) registered office address on our records, gess here: LINDA EMILSE VARGAS CASTILLO 11458 SW 237 TERRACE Enter Florida street. HOMESTEAD	A cords "Limited Liability Company," the designation "LLC" or the abbreve cable: 11458 SW 237 TERRACE HOMESTEAD, ET ADDRESS) 11458 SW 237 TERRACE HOMESTEAD, 11458 SW 237 TERRACE HOMESTEAD, 11458 SW 237 TERRACE HOMESTEAD, 11458 SW 237 TERRACE 13032	APR 28, 2022 and ass lowing: of the limited liability company here: able: 11458 SW 237 TERRACE HOMESTEAD, FL 33032 ET ADDRESS) Registered office address on our records, enter the name of the new iss here: LINDA EMILSE VARGAS CASTILLO 11458 SW 237 TERRACE Enter Florida street address HOMESTEAD , Florida 33032

New Registered Agent's Signature, if changing Registered Agent:

VENETO DECO USA LLC

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.

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
MGR	LINDA EMILSE VARGAS CAST	11458 SW 237 TERRACE HOMESTEAD, FL 33032	2 ■ Add
			Remove
			_ □Change
AMBR	EDWIN YOBANI AVILA PULIDO	11458 SW 237 TERRACE HOMESTEAD, FL 33033	2 □Add
			□Remove
MGR	DISENOS Y ACABADOS 1 A	AUTOPISTA MEDELLIN NR 89-75 BOGOTA COLO	= Change
		ACIONI ISTA SIGNALA NICOZ (CINOCIA CANA)	□Add
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ffective	date, if other than the date of the date is listed, the date must be s	of filing:	prior to data of filing		onal)	ናስና በኃስግ
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ocument	s effective date on the Depart	ment of State's reco	ords.			
record s	ecifies a delayed effective date	e, but not an effecti	ve time, at 12:01 a.	m. on the earlier of: (b) The 90th day at	fter the
	PTEMBER 20	2022				
SE Dated_		_	•			

Typed or printed name of signee