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Office Use Only



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COYER LETTER

TO:

Registration Section
Division of Corporations

VERONA 500 HOLDINGS 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:

INAKI SAIZARBITORIA, ESQ.

Name of Person

Firm/Company

21 S.W. 15 ROAD SUITE 200

Address

MIAMI, FLORIDA 33129

City/State and Zip Code

INAKISAI@AOL.COM

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

For further information concerning this matter, please call:

INAKI SAIZARBITORIA, ESQ. at (

,305<u>,</u>374-4106

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

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

VERONA 500 HOLDINGS LLC

TO	
ARTICLES OF ORGANIZATION	
$^{\prime\prime}$ OF	:
VERONA 500 HOLDINGS LLC (Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	`
VERONA 500 HOLDINGS LLC	,
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	
(A Florida Limited Liability Company)	5
The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 3, 2014 and assigned	
√ Y	
Florida document number L14000140544	
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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."	
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	
City Zip Code ·	
New Registered Agent's Signature, if changing Registered Agent:	

If Changing Registered Agent, Signature of New 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 amending the Managers or Authorized Member on our records, <u>enter the title</u>, <u>name</u>, <u>and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	BEIGE WORLD INVEST LTD.	200 S. BISCAYNE BLVD. WAY	/ □ Add
•		SUITE 405	■ Remove
		MIAMI, FLORIDA 33131	
MGR	ANA MARIA DIAZ	200 S. BISCAYNE BLVD. WAY	∕ ■ Add
		SUITE 405	□ Remove
		MIAMI, FLORIDA 33131	
MGR	LIVIANO DOGANIERO	200 S. BISCAYNE BLVD. WAY	≡ Add
		SUITE 405	_□ Remove
		MIAMI, FLORIDA 33131	_
			_□ Add
			_□ Remove
	•		_
			_□ Add
	•		_□ Remove
			<u>.</u>
			_□ Add
		•	_□ Remove

<u> </u>	
e effective date must be specific, cannot be prior to date of receipt or filed date and cann	ot be more than 90 days after
e effective date must be specific, cannot be prior to date of receipt or filed date and cannot be date this document is filed by the Florida Department of State)	(optional) not be more than 90 days after
e effective date must be specific, cannot be prior to date of receipt or filed date and cannot be date this document is filed by the Florida Department of State) ated OCTOBER 17 August Varia	ot be more than 90 days after
feetive date, if other than the date of filing: the effective date must be specific, cannot be prior to date of receipt or filed date and cannot be date this document is filed by the Florida Department of State) ated OCTOBER 17 Signature of a plember or authorized representate ANA MARIA DIAZ	tive of a member

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Filing Fee: \$25.00