## 11400174795

(Request	or's Name)
(Address	)
(Address	)
(City/Sta	te/Zip/Phone #)
PICK-UP	WAIT MAIL
(Busines	s Entity Name)
(Docume	ent Number)
Certified Copies	Certificates of Status
Special Instructions to Filing	Officer:

Office Use Only



800273796458

06/17/15--01016--024 \*\*25.00

SECRETARY OF STATE ALLAHASSEE, FLORINA

TILED

ONHI 8 2018

## **COVER LETTER**

SUBJECT: Vayavelo, LLC.  Name of Limited Liabi	
Name of Limited Liabi	lity Company
The enclosed Articles of Amendment and fee(s) are submitted for	or filing.
Please return all correspondence concerning this matter to the following	llowing:
Laura Mayer	
Stradista, LC.	
Fi	rm/Company
2101 Brickell Avenu	ie, Suite 503
	Address
Miami, FL 3312	19
Miami, FL 3312 city/si laura @ Stradist	Tate and Zip Code  O. COM  I for future annual report notification)  ARE  ARE  ARE  ARE  ARE  ARE  ARE  AR
·	for future annual report notification)
For further information concerning this matter, please call:	E. 6 1 1
Name of Person a	Area Code Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the following amount:	
Certificate of Status C	5.00 Filing Fee & S60.00 Filing Fee, ertified Copy dditional copy is enclosed)  Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations

TO:

Registration Section **Division of Corporations** P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS: \* UPS.
Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vayavélo, LLC.		
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on o Liability Company)	ur records.)
The Articles of Organization for this Limited Liability Company	were filed on	and assigned
Florida document number <u>L14000174795</u>		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab  Stradista, LLC  The new name must be distinguishable and contain the words "Limited Liabi		
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designar	tion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>
(Principal office address MUST BE A STREET ADDRESS)		2015 J
Enter new mailing address, if applicable:		TARY O
(Mailing address MAY BE A POST OFFICE BOX)		A D. FLORII
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		records, enter the name of the ne
New Registered Office Address:	Enter Florida str	eet address
		, Florida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	ree to act in this capac performance of my d provided for in Chapt	uties, and I am familiar with and er 605, F.S. Or, if this document is
If Cha	nging Registered Agent, S	ignature of New Registered Agent

Page 1 of 3

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	Membe

<u>Title</u>	Name	<u>Address</u>	Type of Action
			☐ Add
			Remove
			☐ Change
•			□ Add
			□ Remove
			Add SECRET CORRECTION RemigN
			SECRITARY DF STARE Add
	<del> </del>		☐ Remove
			Change
			Add
			□ Remove
			☐ Change
	<del></del>		Add
			□ Remove
			Change

	Onticle III.
_	Provide bicycle repair service.
-	Sell bicycles and bicycle related merchandise (parts, clothin
_	gear and accessories, including private label.
_	Provide Operate café within store providing
	coffee, beer, wine and prepared food and snacks.
	Provide quarterly cycling tours and on-going
_	bicycle rentals.
_	
-	SEC.
_	AND SECTION OF THE PARTY OF THE
	SA THE
	PSIA D
-	PE 0
-	
iecti	ive date, if other than the date of filing: June 1 , 2015 (optional)
n effe	ective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed.
	ent's effective date on the Department of State's records.
rec	ford specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlie
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlied 90th day after the record is filed.
The .	90th day after the record is filed.
The .	June 1 , 2015
The	90th day after the record is filed.

Page 3 of 3

Filing Fee: \$25.00