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Office Use Only



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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJ	MERIDIAN	1 842 LLC	e de la la la la desagna de la companya de la comp La companya de la co	F 1 4
		Name of Lim	ited Liability Company	
The er	nclosed Articles of	Amendment and fec(s) are sub	mitted for filing.	
Please	e return all correspo	ndence concerning this matter	to the following:	
		BRIAN F. MISIUNAS, CI	°A	
			Name of Person	
		PINCHASIK YELEN MU	SKAT STEIN, LLC	
		All Andrews and the second sec	Firm/Company	
		3225 AVIATION AVE, ST	ГЕ 500	
		•	Address	
		MIAMI, FL 33133		
		******	City/State and Zip Code	
		BMISIUNAS@PSMS-CPA	COM	F A 4 F 1 19 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		E-mail address: (to be used for future annual report notifi	ication)
For fu	orther information co	oncerning this matter, please ca	all:	
BRIA	N F. MISIUNAS, O	CPA.	305 858-5800 at ()	
	Name o	f Person		Telephone Number
Enclo	sed is a check for th	ne following amount:		
a \$2	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

WERIDIAN 642 LLC			<u></u>
(<u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our requited Liability Company)	cords.)	
The Articles of Organization for this Limited Liability Comp Florida document number <u>L16000103506</u> .	pany were filed on MAY 21, 201	6	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited	liability company here:		
VALEVALE LLC			
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "	LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRES:	<u></u>		
		19 <u>24</u> 10 m	
Enter new mailing address, if applicable:		25	
(Mailing address MAY BE A POST OFFICE BOX)		EO.	u <u>m</u>
		F S .	
		□ [1]	: 2
B. If amending the registered agent and/or registere	d office address on our reco	ords, <u>enter t</u>	he name of the ne
registered agent and/or the new registered office address	here:		ewg.
Name of New Registered Agent:			
New Registered Office Address:			<u>. </u>
	Enter Florida street ad	dress	
	,	Florida	
	City		Zip Code

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

MEDIDIANISATIO

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 Changing Registered Agent, Signature of New Registered Agent

MGR = M AMBR = A	Manager = Authorized Member		
<u> Fitle</u>	<u>Name</u>	Address	Type of Action
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an effect	ive date is listed, the date must be specific the date inserted in this block does n	and cannot be prior to dat		days after filing.) Pur	
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ine 9	Oth day after the record is file	ea.			
	Ma. 21	2016			
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	P. FILS				
	May 31 Bri F. Max Signature of	of a member or authorized	representative of a member	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
	BRIAN F. MISIUNAS, CPA		•	SEE TO	m

Page 3 of 3

Filing Fee: \$25.00