

L16000143983

Florida Department of State
Division of Corporations
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Division of Corporations
Fax Number : (850) 617-6283

From:
Account Name : TAXLEAF.COM INC
Account Number : I20140000084
Phone : (305) 541-3980
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VENHER EXPORT LLC

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S. WARREN

OCT 20 2017

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ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

VENHER EXPORT LLC

~~(Name of the Limited Liability Company as it now appears on our records)~~
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/01/2016 and assigned Florida document number L16000143983.

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:

5340 NW 163RD ST
MIAMI, FL 33014

Enter new mailing address, if applicable:

5340 NW 163RD ST
MIAMI, FL 33014

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

Florida

City

Zip Code

New Registered Agent's Signature, if changing 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 Changing Registered Agent, Signature of New Registered Agent

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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	Name	Address	Type of Action
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AMBR	DIODATO, ERIKA	3111 N UNIVERSITY DR STE 105 CORAL SPRINGS, FL 33065	☐ Add ☒ Remove
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AMBR	GONZALEZ RODRIGUEZ, LEANDRO E	5340 NW 163RD ST MIAMI, FL 33014	☒ Add ☐ Remove
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AMBR	VENERO SAAB, ALEJANDRO J	3111 N UNIVERSITY DR STE 105 CORAL SPRINGS, FL 33065	☐ Add ☒ Remove
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AMBR	VENERO SAAB, ALEJANDRO J	5340 NW 163RD ST MIAMI, FL 33014	☒ Add ☐ Remove
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☐ Add
☐ Remove

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

E. 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)

Dated OCTOBER, 17TH, 2017

Signature of a member or authorized representative of a member

ALEJANDRO JATAR VENERO SAAB

Typed or printed name of signee

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