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COVER LETTER

TO:	Registration Se Division of Cor		.			
SUBJE		erprise LLC				
Name of Limited Liability Company						
		Amendment and fee(s) are sub	•			
		Angelo Sochuk				
		Vertice Enterprise LLC	Name of Person			
		4820 SW 161 Lane	Firm/Company			
		Miramar, FL 33027	Address			
		angelo.sochuk@verticeente	•			
For furth	ner information c	E-mail address: (oncerning this matter, please co	to be used for future annual report notifi all:	cation)		
Angelo	Sochuk		786 468-9477 at ()			
	Name o	f Person	Area Code Daytime	Telephone Number		
Enclosed	d is a check for th	ne 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

Vertice Enterprise LLC (Name of the Limited Liability Company as it now appears on our records.

(A Florida Limited Liability Company)

2012 fig. (1) The Articles of Organization for this Limited Liability Company were filed on Florida document number L18000141551 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 contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) Enter new mailing address, if applicable: PO Box 278467 (Mailing address MAY BE A POST OFFICE BOX) Miramar, FL 33027 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 stre<mark>et</mark> address

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.

City

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being addor removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Aresta Group LLC	PO Box 470283 Lake Monroe, FL 32747	■ Add
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	January 01, 2019	
Litecti If an effi	ve date, if other than the date of filing:	ant to 605.0207
Note:	If the date inserted in this block does not meet the applicable statutory filing requirements, this date will no	ot be listed as
docum	ent's effective date on the Department of State's records.	
ao roc	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on th	o carlier of
	90th day after the record is filed.	e carner or
	December 18 2018—	
Dated_		

Page 3 of 3

Filing Fee: \$25.00

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