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COVER LETTER

P.O. Box 6327

Tallahassee, FL 32314

	gistration Se vision of Cor				
SUBJECT:	Veruzi Mot	ors LLC			
SOBOLCT.		Name of Lin	aited Liability Company		
The enclose	d Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please retur	n all correspo	ndence concerning this matter	to the following:		
		Elton Karaj			
		Veruzi Motors LLC	Name of Person		
		404 NE 38th Street	Firm/Company		
		Oakland Park, FL 33334	Address		9181816
		veruzimotors@gmail.com	City/State and Zip Code		AUS 15
For further	nformation c	E-mail address: (oncerning this matter, please c	to be used for future annual report noti all:	fication)	19 AUS 15 PH 2: 30
Elton Karaj			954 249-2846		30
	Name o	f Person		e Telephone Number	 i.
Enclosed 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)	S60.00 Filing F Certificate of Certified Copy (additional copy)	Status & y
	Registr	ING ADDRESS: ation Section n of Corporations	STREET/COURI Registration Section Division of Corporation	n	

2661 Executive Center Circle Tallahassee, FL 32301

Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Veruzi Motors LLC		
(Name of the Limited Liabii (A Florid	lity Company as it now appears on our records.) da Limited Liability Company)	
The Articles of Organization for this Limited Liability (Company were filed on 07/02/2018	and assigned
Florida document number L18000160900	·	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lin	nited liability company here:	
The new name must be distinguishable and contain the words "Lir	nited 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 ADD	RESS)	<u> </u>
		6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
		IS ACT
Enter new mailing address, if applicable:		15 C. R. L.
(Mailing address MAY BE A POST OFFICE BOX)		PH RPC
		RA 2:
		30
B. If amending the registered agent and/or regi registered agent and/or the new registered office add	stered office address on our records, <u>ento</u> <u>lress here</u> :	r the name of the ne
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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being add or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Armand Cuko	1280 SW 4TH CT, BOCA RATON, FL 33432	
			■ Remove
			☐ Change
			☐ Remove
			Change
			□ Add
			☐ Remove
			Change
			D Add
			☐ Remove
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		Add	
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		· ·	☐ Change
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			□ Remove
			☐ Change

	Chang any other information, enter change(s) here. (Attach datational sheets, if necessary.)
	
	08/07/2019
(If an e <u>Note:</u>	fective date, if other than the date of filing: [(optional)] [fective 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 605.0207 (3)([If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the ment's effective date on the Department of State's records.
f the re b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	8-7,2019,
	Signature of Lemember or authorized representative of a member
	Signature of a member or authorized representative of a member

Page 3 of 3

Filing Fee: \$25.00