## L18000732903

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## COVER LETTER

TO: Registration Division of C	Section Forporations		
ELITE F	OUSHOLD PRODUCTS LL	C	
NOBIECT:	Name of Lin	nited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sul	omitted for filing.	
Please return all corres	spondence concerning this matter	to the following:	
	SOFIANE ELFSSAYLI		
		Name of Person	2029 SEP 14
	<del></del>	Firm/Company	<del></del>
	13528 FLETCHER REGE	ENCY DE	
		Address	PH 2:
	TAMPA, FL 33613		
	SOFFOS93@GMAIL.COM	City/State and Zip Code	
	E-mail address: (	to be used for future annual report no	lification)
For further information	reoncerning this matter, please c	all:	
SOFIANE ELFSSAY	I.I	484 4254566 at ( )	
Name	e of Person	Atea Code Daytir	ne Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	S30.00 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 Addi Registration Division of P.O. Box 6: Tallahassee	Section Corporations 327	Street Address: Registration Se Division of Co The Centre of 2415 N. Monro Tallahassee, Fl	rporations Fallahassee oe Street, Suite 810

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELITE HOUSEHOLD PRODUCTS 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  $\frac{10/2/2018}{}$  and assigned Florida document number <u>L 18000232903</u>. This amendment is submitted to amend the following: A. If amending name, ester the new name of the limited liability company here: VENDERESH LLC

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: (Mailing address MAY BE A POST OFFICE BOX) 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

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.

Cav

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 Member

Title	<u>Name</u>	Address	Type of Action
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