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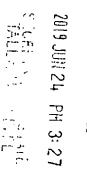
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Certified Copies Certificates of Status
Special Instructions to Filing Officer:





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COVER LETTER

TO: Registration S Division of Co			
SUBJECT:	COMPONENT L	LC lited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Eliana	Name of Person	
		CGY LUC Firm Company	
	4550 11	Address Address FL 34216 City/State and Zip Code O 109 Yo SRGC 9500 to be used for future annual report notifi	1 92
	Bradenton	FL 34/2/6 City/State and Zip Code	0
	E-mail address:	0109 Yo SRGE 9500 to be used for future annual report notif	Cill, COM
For further information	concerning this matter, please c		
Paulo R.	Bento of Person	at (217) Area Code Daytime	9080 e Telephone Number
Enclosed is a check for	the 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

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

Veganolog	y LLC	2019	JUN 24 PH 3:	27
Name of the Limited Line (A F	lorida Limited Liabil	ty Company)	Our records.)	AL and position of
Florida document number $\underline{L} = 90000962$.15	: med on	1001004	and assigned
This amendment is submitted to amend the following	iā;			
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 C	ompany," the design	nation "LLC" or the abl	previation "L.L.C."
Enter new principal offices address, if applicable	:!	1550 7'st	Street V	10 Apt #92
(Principal office address MUST BE A STREET A)	<u>DDRESS)</u> <u> </u>	irudenton	FL . 342	IO
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOS	<u> </u>	71550 Bradenton	71st Street	WEST Not 119
B. If amending the registered agent and/or a registered agent and/or the new registered office		address on our	r records, <u>enter</u>	the name of the new
Name of New Registered Agent:				
New Registered Office Address:	<u>4550 71</u>	5 Slove - S Enter Florida si	west ADa	r-ment #92
_	Braclen to	Olly:	Florida	Finent 书92 34610 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 or removed	; Authorized Person(s) authorized to n from our records:	nanage, enter the title, name, and address of eacl	n person being add
MGR = M AMBR = A	anager uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
AMBR	Paulo K Bento	101 Manhattan Ave	_Add
		101 Manhattan Ave New York, NY 10025	_ 4544 Remove
			Change
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ffective	date, if other tha	n the date of filing:	(optional) or to date of filing or more than 90 days after filing.) Pursuant	KAS A3A
			icable statutory filing requirements, this date will not l	
		the Department of State's record		
e recor	rd specifies a de	layed effec ti ve date, but r	not an effective time, at 12:01 a.m. on the	earlier o
The 9	0th day after the	e record is filed.		
ated		,	,	
		Cleant	thorized representative of a member	
		Signature of a member or au	thorized representative of a member	
		-fa-v.	P.	
		4 1.CIO 0	USOCIO nted name of signee	

Page 3 of 3

Filing Fee: \$25.00