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COVER LETTER

Division of Corpo	rations			
SUBJECT. Veac	nometri LL Name of Limi	· .		
SUBJECT:V	Name of Limi	ited Liability Company		
The enclosed Articles of Ar	nendment and fee(s) are sub-	mitted for filing.		
Please return all correspond	ence concerning this matter	to the following:		
	Gary	Alexis Name of Person	<u> </u>	
		Firm/Company		
	1714 e Glena	oaks Blud. Ap+.	(
	Glendale	CA 91206 City/State and Zip Code	<u> </u>	
		lexis 313@MSN.C	om	
For further information con	cerning this matter, please ca	all:		7 7 7 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
Grany Ale		ar,904,607-	1428 Telephone Number	
(Name of P	erson	Area Code Daytime	refepnone Number	
Enclosed is a check for the	following amount:			1. 4
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Statu Certified Copy (additional copy is encl-	
Mailing Address:		Street Address:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section

TO:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

Veganometri. LL		7 9 <u>3</u>
(Name of the Limited Liability Compa (A Florida Limited I	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L2000007267</u> .		and assigned?
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the abbr	eviation "L.L.C."
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 a agent and/or the new registered office address here:	address on our records, enter the name	of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	· · · · · ·
	, Florida	Zip Code
No. Danier A. America Cincolner of the combine Description of Accord	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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
SUP	Alexis, Gary J, SR.	1220 NW. 129+h Street	□Add
	·	Miami, Fl 33167	⊠Remove
			□Change
MGR	Alexis, Genelle, N	1220 N.W. 129th Street	□Add
		Miami, F1 33167	⊠Remove
			□Change
AC	Alexis, Genay C	1220 N.W. 129th Street	□Add
		Miami, F1 33167	⊠Remove
			□Change
AMG	Alexis, Geneva J	1220 NW. 129th Street	□Add
		Miani, Fl 33167	⊠Remove
			□Change
			🗆 Add
			□ Remove
			□ Change
			🗆 Add
			□Remove
		_	□Change

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) (If an effective 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)(b) Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records. If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed. Lang Olevis
Signature of a member or authorized representative of a member