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	Registration Se Division of Cor			. •	. 3	
	Veteran Giv			5050 trus 112	b 15: 1 1	
SUBJEC	.1:	Name of Lin	nited Liability Company			
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following:						
		Joseph Versacio				
Name of Person Veteran Giving LLC Firm/Company 1850 S Ocean Drive, Apt 3002 Address Hallendale Beach, FL 33009			_			
		Veteran Giving LLC				
			Firm/Company		_	
		Name of Limited Liability Company Tricles of Amendment and fee(s) are submitted for filing. I correspondence concerning this matter to the following: Joseph Versacio				
			Address		<u> </u>	
	Address Hallendale Beach, FL 33009					
		jversacio@gmail.com	City/State and Zip Code		_	
			to be used for future annual report no	otification)		
For furthe	er information co	oncerning this matter, please c	ail:			
Joseph V	ersacio					
	Name of	Person		ime Telephone Numbe	r	
Enclosed	is a check for th	e following amount:				
≘ \$25.0	00 Filing Fee		Certified Copy	Certifica Certified	ite of Status & I Copy	
Ī	Mailing Address	<u>:</u>	Street Address:			

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

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

RECEIVED AUG 1 4 7070

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Veteran Giving LLC		
(Name of the Limited Liability Comps (A Florida Limited)	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company lorida document number L20000082650	were filed on 3/16/2020	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" o	r the abbreviation "L.L.C."
nter new principal offices address, if applicable:	1850 S Ocean Drive, Apt 3002	202
Principal office address MUST BE A STREET ADDRESS)	Hallendale Beach, FL 33009	
		→ <u></u>
		o T
nter new mailing address, if applicable:	1850 S Ocean Drive, Apt 3002	20 PB 11
Mailing address MAY BE A POST OFFICE BOX)	Hallendale Beach, FL 33009	S S
		00
. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new regis
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	da 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 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>	Name	<u>Address</u>	Type of Action
MGR	Joseph C DiCostanzo	185 Hillyer Circle, Middletown, NJ 07748	⊟ Add
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Effective date, if other than If an effective date is listed, the date Note: If the date inserted in the document's effective date on the	must be specific a is block does not	and cannot be prior t meet the applic	to date of filing o	r more than 90 day	(optional) ss after filing.) Puts, this date will	ursuant to (605.020 listed a:
e record specifies a delayed effird is filed.	ective date, but n	iot an effective ti	ime, at 12:01 a.r	n. on the earlier	of: (b) The 9	0th day a	fter the
		2020					
August 10		_,	<u>.</u>				
		, 2020	_·				

Filing Fee: \$25.00