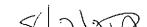
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: VENICE FLOWER COMPANY Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
MIKYONG KANDALEC Name of Person
VERITY FLOWERS Firm/Company
293 DAYLILY BLVD Address
NOKOMIS, FL 34275 City/State and Zip Code
MKANDALEC @ YAHOD . COM I:-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
MICHONG KANDAUEC at (941) 525 · 3744 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount: \$\$\sum{\$\sin{\$
Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy Certified Copy (additional copy is enclosed)

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

Street Address: 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

VENICE FLOWER (Name of the Limited)	- COMPAN Liability Compan Florida Limited Li	y as it now appears on or ability Company)	ur records.)	
The Articles of Organization for this Limited Liab		were filed on 3 8	2020	and assigned
This amendment is submitted to amend the follow	ing:			
A. If amending name, enter the new name of the				
VEPITY FLOWERS LLC The new name must be distinguishable and contain the work	ds "Limited Liabili	ty Company," the designat	tion "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:		ILY BL	VD
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO	<u>)X)</u>	293 DAYL	ILY BL , FL 34	VD 22 275 =
B. If amending the registered agent and/or registered office address because and/or the new registered office address because the second of the new registered of the second of the new registered of the second of the new registered of the new		ddress on our record	s, <u>enter the na</u>	• •
Name of New Registered Agent:	MIKYC	NG KANDA	ALEC	1
New Registered Office Address:	293 D	AYLILY BI	UD eet address	
	NotoM	IS City	Florida _	34275
		City		z.q) Caue

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.

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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>	Address	Type of Action
MGR	MIKYONG KANDALEC	293 DAYLILY BLVD	□Add
		NOKOMIS, FL 34275	□Remove
			i\(\mathbb{Z}\)Change
			□ Add
			Remove
			Change
•	<u> </u>		□Add
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fan effect <u>Note:</u> If	e date, if other than the dive date is listed, the date must be the date inserted in this blockt's effective date on the Dep	e specific and canno k does not meet th	ne applicable statuto	(optio ing or more than 90 days after to ory filing requirements, this	illing \ Pursuant to 605 0201
record s d is filed.	pecifies a delayed effective o	date, but not an eff	ective time, at 12:0	1 a.m. on the earlier of: (b)	The 90th day after the
ated	JULY 7	, <u>2</u>	021		
	JULY 7	gnature of a membe	r or authorized repres	entative of a member	