120000173976

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A BUTLER FEB 18 2022

COVER LETTER

	gistration Se ision of Cor					
SUBJECT:	Veronica Scherrei LLC					
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	***************************************	Name of Lin	ited Liability Company			
The enclosed	l Articles of	Amendment and fee(s) are sub	omitted for filing.			
Please return	all correspo	ondence concerning this matter	to the following:			
		Veronica Scherrer				
			Name of Person			
		Veronica Scherrer LLC				
			Firm/Company			
		7504 Sandhurst Rd S				
			Address	 		
		Jacksonville FL 32277				
			City/State and Zip Code			
		OliviasPlace7@gmail.com	to be used for future annual repo	or natitionian)		
For further in	nformation c	concerning this matter, please c		nt norme actor)		
Veronica Sc	herrer		904-403			
	Name o	f Person	Area Code T	Daytime Telephone Number		
Enclosed is a	i check for th	he following amount:				
■ \$25.00 I	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed		
<u> Ma</u>	iling Addres	<u>is:</u>	<u>Street Addre</u>	<u>:88:</u>		
Re	gistration S		Registratio	Registration Section Division of Corporations		
). Box 632	-		e of Tallahassee		
	llahassee, l			onroe Street, Suite 810		

Tallahassee, FL 32303



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

Veronica Scherrer LLC

2022 FEB -7 PM 2: 02

(Name of the Limited Liabi	lity Company as it now appears on our records.) da Limited Liability Company) SECRETARY OF STATE
(A riono	da Limited Liability Company) SECRETARY OF STATE TALLAHASSEE, FL
The Aminima of Oscarios for this Links of Links	Company were filed on 06/22/2020 and assigned
Florida document number <u>L20000173976</u>	·
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
The new name must be distinguishable and contain the words "Li	mited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
The new many most be distinguishable and contain the words. On	miled Eldonity Company, the designation (1990) of the above varion (1990).
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADD	RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registere	ed office address on our records, enter the name of the new registere
agent and/or the new registered office address here:	
Nights of Name Descript word Assemts	
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	Elouido
	, Florida

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>	<u>Name</u>	Address	Type of Action
MGR	Mirelys Rodriguez Salabarria	3384 Rogero Rd Jacksonville FL 32277	= Add
			□Remove
			□ Change
			□Add
			□Remove
			□ Change
			🗆 Add
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······································			□Add
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			D61

Percentages:			
Veronica Scherrer	25%		
Milan Rodriguez	25%		
Mirelys Rodriguez Salabarri	ia 50%		
			-
·	-		·
	 		
			.,,
			
ective date, if other than the		to date of filing or more than 9	(optional) 0 days after filing.) Pursuant to 605,0207
	lock does not meet the applic	able statutory filing require	ments, this date will not be listed as
cord specifies a delayed effective filed.	ve date, but not an effective ti	me, at 12:01 a.m. on the ear	rlier of: (b) The 90th day after the
ed 2/4/2027 Decome	<u>/</u>	—·	
Decomo	ia Som		
	Signature of a member or author	orized representative of a mem	ber

Filing Fee: \$25.00

RECEIVED

2022 FEB -7 PM 1:41

SECRETARY OF STATE TALLAHASSEE, FL

January 28, 2022

VERONICA SCHERRER 7504 SANDHURST RD S JACKSONVILLE, FL 32277

SUBJECT: VERONICA SCHERRER LLC

Ref. Number: L20000173976

We have received your document for VERONICA SCHERRER LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Letter Number: 322A00002259

Anissa Butler Regulatory Specialist II