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OCT 31 2020 S. YOUNG

COVER LETTER

TO:

Registration Section Division of Corporations

	A GROUP MIAMI LLC.				
SUBJECT;	Name of Lin	ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
	DANNIEL A VERA				
		Name of Person			
	THE VERA GROUP MIA	MILLC.			
		Firm/Company			
	1545 NW 15 TH ST RD A	.PT # 1008			
		Address	_ 		
	MIAMI FL 33125				
		City/State and Zip Code			
	DANNYVERA23@YAHO	MO).OM			
	E-mail address: (to be used for future annual report noti	fication)		
For further information c	oncerning this matter, please c	all:			
DANIEL A VERA		786 972-4883			
Name of Person			e Telephone Number		
Enclosed is a check for the	ne following amount:				
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy radditional copy is enclosed)		
Mailing Addres Registration S Division of C	Section orporations	Street Address: Registration Sec Division of Cor	porations		
P.O. Box 6327 Tallahassee, FL 32314			The Centre of Tallahassee 2415 N. Monroe Street, Suite 810		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE VERA GROUP MIAMILLC. (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) he Articles of Organization for this Limited Liability Company were filed on $\frac{\text{SEPT}}{10,2020}$ lorida document number 1.20000286891 his amendment is submitted to amend the following: . If amending name, enter the new name of the limited liability company here: HE VERA GROUP MIAMI LLC. ne new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 1545 NW 15TH STRD APT #1008 nter new principal offices address, if applicable: MIAMLEL 33125 Principal office address MUST BE A STREET ADDRESS) nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX) . If amending the registered agent and/or registered office address on our records, enter the name of the new registered gent and/or the new registered office address here: DANIEL A VERA Name of New Registered Agent: 1545 NW 15 ST RD APT #1008 New Registered Office Address: Enter Florida street address MIAMI

ew Registered Agent's Signature, if changing Registered Agent:

hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the votisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and rept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is ring filed to merely reflect a change in the registered office address. Thereby confirm that the limited liability ompany has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

1GR = Manager MBR = Authorized Member

itle	<u>Name</u>	Address	Type of Action .
1GR	DANIEL A VERA	1545 NW 15 TH ST RD APT # 1008 MIAMI FL	
			□Remove
			□Change
			JAdd
			□Remove
			⊒Change
			□Add
			TRemove
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