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(Reque:	stor's Name)	
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5/1/20

COVER LETTER

TO: Registration Division of C	Section Corporations		1
SUBJECT: Vero Ais	rport Storage, LLC		
	Name of L	imited Liability Company	
	of Amendment and fee(s) are supported this matter		
	Ralph L. Evans, Esq.	Name of Person	
		ranic of Cison	
	Collins, Brown, Barkett,		
		Firm/Company	···
	756 Beachland Boulevard	1	
		Address	
	Vero Beach, FL 32963		
		City/State and Zip Code	
	revans@verolaw.com	/- \	
For further information	concerning this matter, please of	(to be used for future annual report not	ification)
Ralph L. Evans	of Person	at (772) 231-4343 Area Code Daytim	e Telephone Number
Enclosed is a check for the	he following amount:		
■ \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & 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 FI 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vero Airport Storage, LLC		
(Name of the Limited) (A)	lability Company as it now appears on our records.) lorida Limited Liability Company)	
The Articles of Organization for this Limited Liabil		and assigned
Florida document number <u>L21000148922</u>		
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
Vero Beach Airport Storage LLC		· <u></u>
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	~
(Principal office address MUST BE A STREET A		
		
Enter new mailing address, if applicable:		•
Mailing address MAY BE A POST OFFICE BOX		
ELECTION OF THE BUX		
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our records, <u>enter the na</u> e:	ame of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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.

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ir an effe <u>Note:</u> I	ve date, if other than the date of filing:
record d is file	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
San 1	$\frac{6/(\gamma/2)}{2}$, $\frac{2021}{2}$.
Dated _	
Jated	Signature of a member or authorized representative of a member