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COVER LETTER

Division of Corporations VELUM PRO LLC SUBJECT: 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: Irvna Akar Name of Person Innovo Law PLLC Firm/Company 4700 Sheridan Street STET Address Hollywood, Florida 33021 City/State and Zip Code mkunina@innovo.law E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Iryna Akar Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & \square \$55.00 Filing Fee & ☐ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed)

Mailing Address:

Registration Section

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

VELUM PRO LIQ		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L21000211156}{L21000211156}$.	were filed on <u>05/21/2021</u>	and assigned
'his amendment is submitted to amend the following:		
A. 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" or the al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter the nan</u>	ne of the new regist
Name of New Registered Agent:		1000 July 1000 J
New Registered Office Address:	Enter Florida street address	- 3 Fm
		平口
	, Florida	Zin Coda
	City	247 COUR (3)

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.

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

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>	<u>Address</u>	Type of Action
AM`BR	Rustam Junusov	935 Weeping Willow Way Hollywood, FL 33019	= Add
			□Remove
		*	□Change
			□Add
			□Remove
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ore than 90 days after filing.) Pursuant to 605.0 grequirements, this date will not be listed
requirements, this date will not be fistee
rot.
n the earlier of: (b) The 90th_day after t
S C
of a member
~ 3.

Typed or printed name of signee