KZ1 OCC 244544

(Red	questor's Name)	
(Add	dress)	
(Add	lress)	· · · · · · · · · · · · · · · · · · ·
(City	//State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nan	ne)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

Office Use Only



700369206207

07/01/21--01013--004 **25.00



COVER LETTER

TO:

TO:	Registration Se Division of Cor			
	Veez LLC			
SUBJE	ECT:	Name of Lim	ited Liability Company	
		Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Jean L. Verdieu		
			Name of Person	
				202
		5627 Elmhurst Cir. Apt 31	Firm/Company	SECRETA SECRETA
		Oviedo, FL 32765	Address	-1 PM 2: 08 ARY OF STATE
		weare@shopveeze.com	City/State and Zip Code	1.1
r. c			to be used for future annual report noti	fication)
	ther information o Verdieu	oncerning this matter, please ca	an: 863 2329919	
Jean 1,	., verdicu		at ()	
-:	Name o	Person		e Telephone Number
Enclos	ed is a check for th	e following amount:		
≣ \$2	5.00 Filing Fce	☐ \$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 Addres Registration S Division of C P.O. Box 632 Tallahassee, I	Section orporations 7	Street Address: Registration Se Division of Cor The Centre of T 2415 N. Monro Tallahassee, FL	porations fallahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VEEZE LLC				
(<u>Name of the Limited Liability Compa</u> (A Florida Limited I	ny as it now appears on our record liability Company)	<u>is.</u>)		
The Articles of Organization for this Limited Liability Company L21000249549 Lorida document number		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:			
VEF Z LLC				
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC	C" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable:	5627 Elmhurst Cir. Apt 311			
Principal office address MUST BE A STREET ADDRESS)	Oviedo, FL 32765	20 S: 20		
		ZI J EGR		
Enter new mailing address, if applicable:	5627 Elmhurst Cir. Apt 311	LAHAY LAHAY LAHAY		
Mailing address MAY BE A POST OFFICE BOX)	Oviedo, Fl. 32765	SO P		
		5Th		
		m &		
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	iddress on our records, <u>enter</u>	the name of the new regi		
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	 ,,	orida		
	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.

If Changing Registered Agent, Signature of New 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
			□Add
			Remove
			□Add
			Change
			SECRE TAIL
			Add A
			Remove
		•	□Change
			□Remove
			□Change
			□Add
			□Remove
		 	
	.	<u> </u>	
			□Remove
			□Change

					-
					
			· ··· ··		
		1	· · · · · · · · · · · · · · · · · · ·		
			<u> </u>		
				 	 -
					
			<u> </u>	S 	
	 	 	<u>حر</u>	# <u></u>	
			AHI		
			.88,	PK	M
			्	S 5	
				TAFE 88	
<u></u>					
Effective date, if other than the da	ate of filing:		(optional)		
If an effective date is listed, the date must be Note: If the date inserted in this block	e specific and cannot be prior		an 90 days after filing	.) Pursuant to	
document's effective date on the Depa			mements, this date	Will flot be	nstea as
e record specifies a delayed effective d rd is filed.	ate, but not an effective ti	me, at 12:01 a.m. on the	earlier of: (b) Th	ie 90th day a	after the
ia is meu.					
Dated					
		•			
. ()					
P			··· • · · · · · · · · · · · · · · · · ·		_
P	enature of a member or author	orized representative of a n	nember		-