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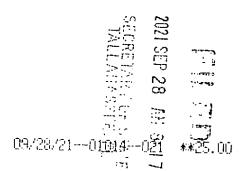
(Requestor's Name)
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(Business Entity Name)
(Document Number)
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TALLAHASSEE, FLORIDA

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Department of State Division of Corporations

Date: 09/28/2021

American Expediting (Stealth Courier) 1531 Commonwealth Business Dr. Ste 105 Tallahassee, Fl. 32303 850-294-5632

## **Stealth Courier Box**

Company: Velvas LLC

Requester: Achieve Capital

Order: 13455112



Department of State Division of Corporations

Date: 09/28/2021

American Expediting (Stealth Courier) 1531 Commonwealth Business Dr. Ste 105 Tallahassee, Fl. 32303 850-294-5632

## **Stealth Courier Box**

Company: Velvas LLC

Requester: Achieve Capital

Order: 13455112

#### **COVER LETTER**

	ion Section of Corporations
VELX	'AS LLC
SUBJECT:	Name of Limited Liability Company
The enclosed Artic	des of Amendment and fee(s) are submitted for filing.
Please return all co	rrespondence concerning this matter to the following:
	Patricio Frias
	Name of Person  Corp Sv Cs Intl
	Firm/Company
	7050 W Palmetto Park Rd #15-300
	Address
	Boca Raton, Florida 33433
	City/State and Zip Code operations@achievegea.com
	E-mail address: (to be used for future annual report notification)
	tion concerning this matter, please calt:
Patricio Frias	561 451 6330
	at (
Enclosed is a check	for the following amount:
≡ \$25.00 Filing £	Certificate of Status  Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certified Copy (additional copy is enclosed)
<u>Mailing A</u> Registra	ddress: ion Section Street Address: Registration Section

Mailing Address:
Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

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

VELVAS LLC					
(Name of the Limited Liability Compar (A Florida Limited L	nv as it now annears on our records.) iability Company)		<del></del>		
The Articles of Organization for this Limited Liability Company Florida document number 1.21000260209	were filed on	and	assigned		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabi	lity company here:	71 338	2021		
The new name must be distinguishable and contain the words "Limited Liabili	ty Company," the designation "LLC" or the abi	préviation	"L.£2."	73	
Enter new principal offices address, if applicable:	3530 MYSTIC POINTE DR #1406	AA.	<u>√</u> 3,	्याम ्या	
(Principal office address MUST BE A STREET ADDRESS)	AVENTURA, FLORIDA, 33180	100 m	3	<del>ा</del> 	
		<del>اد دار</del> اید اندا		(1==	
Enter new mailing address, if applicable:	3530 MYSTIC POINTE DR #14		8: 17		
(Mailing address MAY BE A POST OFFICE BOX)	AVENTURA, FLORIDA, 33180				
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	ddress on our records, <u>enter the nam</u>	e of the	new regis	ste re	
Name of New Registered Agent:			<u>.</u>		
New Registered Office Address:					
New Registed Office Address.	Enter Florida street address	<del></del>		_	
	, Florida				
	City	Zip Co	de		
New Registered Agent's Signature, if changing Registered Agent:					
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	performance of my duties, and I am for rovided for in Chapter 605, F.S. Or, i	amiliar if this d	with and ocument		

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> Type of Action Name Address . 3530 MYSTIC POINTE DR #1406, AVENTURA, FLORIDA, 33180 AMBR LOPEZ VELEZ, MONICA X1Remove Change LOPEZ VELEZ, MONICA MGR 3530 MYSTIC POINTE DR #1406, AVENTURA, FLORIDA, 33180 \_\_\_\_\_ **≣** Add □ Change  $\square$ Add □Remove Change  $\Box$ Add □Remove Change □Add □Remove.

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tive date, if other than the date of filing ffective date is listed, the date must be specific and If the date inserted in this block does not ment's effective date on the Department of St	iect the applicat	o date of filing or notice statutory filing	ore than 90 days g requirements	optional) after filing.) Pursu this date will n	ant to 605.0 ot be listed
ord specifies a delayed effective date, but not filed.	an effective tim	c, at 12:01 a.m.	on the earlier o	f: (b) The 90th	ı day after t
SEPTEMBER 27	2021				
i,	10	<u>.</u> .			
	KP				
	T = T	red representative	of a member	<del></del>	<del></del>
Signature of a m	remocy or author	zeu ichiescheanive	or a michilici		

Filing Fee: \$25.00