

L21000260209

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

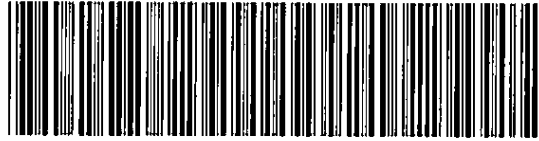
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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09/28/21--01014--00

**25.00

2021 SEP 28 AM 3:21 7
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

2021 SEP 28 PM 12:41
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA

RECEIVED



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

TO: Registration Section
Division of Corporations
VELVAS 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:

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)

For further information concerning this matter, please call:

Patricio Frias

561 451 6330

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the 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, FL 32303

VELVAS LLC

The Articles of Organization for this Limited Liability Company were filed on 06/04/2021 and assigned Florida document number 121000260209.

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>	<u>Type of Action</u>
AMBR	LOPEZ VELEZ, MONICA	3530 MYSTIC POINTE DR #1406, AVENTURA, FLORIDA, 33180	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	LOPEZ VELEZ, MONICA	3530 MYSTIC POINTE DR #1406, AVENTURA, FLORIDA, 33180	<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2021 SEP 28 AM 8:07
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

2021 SEP 28 AM 8:17
SECRETARY OF STATE
TALLAHASSEE, FL

FILED

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

SEPTEMBER 27 2021
Date: _____

Signature of a member or authorized representative of a member

PATRICIO FRIAS

Typed or printed name of signee

Filing Fee: \$25.00