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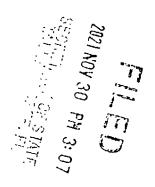
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## **COVER LETTER**

Tallahassee, FL 32314

	ation Section of Corporations					
SUBJECT:	VERCAS	NUESTY	news LLC			
	·	Name of Limited	Liability Company			
The enclosed Arti	icles of Amendment an	d fec(s) are submit	sted for filing.			
Please return all c	correspondence concern	ing this matter to	the following:			
		A. P	estano			
			Name of Person			
		BSSA	3			
			Firm/Company			
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			City/State and Zip Code	335]	2021 NOV 30 PH 3: 0	1
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For further inform	nation concerning this r	natter, please call:			· E 7	
Δ.	PesTANO Name of Person		at ( <u>954</u> ) <u>57.8</u> Area Code Daytir	ne Telephone Number		
Enclosed is a che	ck for the following an	ount:				
☑ \$25.00 Filing	g Fee		☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60,00 Filing Certificate of Certified Cop (additional copy	f Status & py	
Registi	Address: ration Section on of Corporations		Street Address: Registration Se Division of Co			
	ox 6327		The Centre of			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Vercas loves	ST MENT	<u>s LLC</u>	<u> </u>	<del></del>
( <u>Name of the Limited Liability Comp</u> (A Florida Limited	p <mark>any as it now aj</mark> I Liability Compa	opears on our rec my)	<u>ords.</u> )	
The Articles of Organization for this Limited Liability Compan Florida document numberL2\000265062	iy were filed oi	06/0	8/2021	and assigned
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited lia	bility compan	<u>y here</u> :		
Versac Investmen	ITS	LLC.		
The new name must be distinguishable and contain the words "Limited Liab	hility Company,"	the designation "l	LC' or the abbrévi	ation "L.L.C."
Enter new principal offices address, if applicable:			<u> </u>	ð Ti
(Principal office address MUST BE A STREET ADDRESS)			- 4 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	ω paras
			<u>.,v.⊡</u>	
Enter new mailing address, if applicable:			ESTATE	<u>a</u> 5
(Mailing address MAY BE A POST OFFICE BOX)			• •	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on o	ur records, <u>en</u>	ter the name of	the new registered
Name of New Registered Agent:				
New Registered Office Address:	F.nte	r Florida street add	dress	<del></del>
			Florida	
(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  Articles of Organization for this Limited Liability Company were filed on	Zip Code			
New Registered Agent's Signature, if changing Registered Agen	ı <u>t:</u>			

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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
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Tective date, if an effective date is	isted, the date mus	t be specific and	cannot be prior	to date of filing	or more than 90 d	ays after filing.)	Pursuant to 6	05.020
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