

L21000 334520

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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07/15/24--01020--000 **35.00

STATE
OFFICE
PM 12:32

R. HUNT

07/15/24

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: SABER HOLDINGS LLC

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:

Ryan Tetreault

Name of Person

Firm/Company

8405 W Central Ave Apt 2207

Address

Wichita, KS 67212

City/State and Zip Code

iryanCT7@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

STATE
TALLAHASSEE, FL

PM 12:32

Ryan Tetreault

Name of Person

at (386)

Area Code

337-1358

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

SABER HOLDINGS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 07/22/2021 and assigned Florida document number L2600334520.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

VEERRA LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

8405 W Central Ave Apt 2207

Wichita, KS 67212

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8405 W Central Ave Apt 2207

Wichita, KS 67212

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

Enter Florida street address

City, **Florida**

City

COUNTY OF JACKSON, FL

ZIP CODE 332

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

Title	Name	Address	Type of Action
			☐ Add
			☐ Remove
			☐ Change
			☐ Add
			☐ Remove
			☐ Change
			☒
			☐ Add
			☐ Remove
			☐ Change
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			☐ Add
			☐ Remove
			☐ Change

1
15 PM 12:32
STATE
AMASS E.F.

STATE
AMASSIE.F.

(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)

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.

Ryan V. Arnold Sign

Ryan Tetreault

Typed or printed name of signee

Filing Fee: \$25.00