

122000095282

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

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MAIL

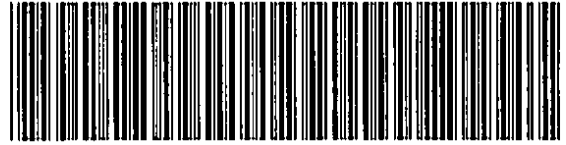
(Business Entity Name)

(Document Number)

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FILED

2022 APR -4 PM 4:05

STATE
TALLAHASSEE, FL

cf 4/18/2022

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Veritas Realty 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:

Justin Munizzi

Name of Person

The Munizzi Law Firm

Firm/Company

101 N. Woodland Blvd., Suite 601

Address

DeLand, FL 32720

City/State and Zip Code

Justin@MunizziLaw.com

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

For further information concerning this matter, please call:

Justin Munizzi

407 718-2289
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

11-1

2022 APR -4 PM 4:05

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

U.S. AIR FORCE
TALLAHASSEE, FL

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> |
|--------------|-------------|----------------|---------------------------------|
| | | | <input type="checkbox"/> Add |
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

N/A

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.

Dated 03/29/2022

Signature of a member or authorized representative of a member

William F. Christen

Typed or printed name of signee