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SECRETARY OF STATE

TALLAHAS SEF STATE

COVER LETTER

TO:

Registration Section Division of Corporations

Tallahassee, FL 32314

SUBJECT: 💛 🤆	erue Gr	OUP LLC		
,	Name of Lim	nited Liability Company		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Pablo	A Barra Name of Person	gan	
	Verve	Group Ll		
	701 3	rickell Key	Blud	# 204
	Miami	FL 33131 City/State and Zip Code		
	Verues:	TOUPLLCE GM. to be used for future annual report noting	Cil COM	2022 SEC TA
For further information co	oncerning this matter, please c		,	SEP RETA
Pablo P	arragan	at (<u>786)</u> 637	3792 Telephone Number	2022 SEP 12 MM 9: 43 SECRETARY OF STATE TALLAHASSEE, FL
Enclosed is a check for th	e following amount:			
X \$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	te of Status &
Mailing Address Registration S Division of C	ection	Street Address: Registration Sec Division of Cor		
P.O. Box 632	-	The Centre of T	•	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

·		7/13/2022	
The Articles of Organization for this Limited Liability Compar	ny were filed on	and assigned	
Florida document number \(\triangle \(\triangle \(\triangle \) \(\triangle \) \(\triangle \(\triangle \) \(\triangle \) \(\triangle \) \(\triangle \(\triangle \) \(\triangl			
This amendment is submitted to amend the following:			
f amending name, enter the new name of the limited liability company here: ew name must be distinguishable and contain the words "Limited Liability Company," the designation "L.L.C." or the abbreviation "L.L.C." er new principal offices address, if applicable: cipal office address MUST BE A STREET ADDRESS) er new mailing address, if applicable: ling address MAY BE A POST OFFICE BOX) Tamending the registered agent and/or registered office address on our records, enter the name of the newlegalistered			
The new name must be distinguishable and contain the words "Limited Liz	ability Company," the des	signation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRESS)			
		20: SE	
Enter new mailing address, if applicable:		2022 SECRE	
(Mailing address MAY BE A POST OFFICE BOX)		ATT P	
		in the second se	
B. If amending the registered agent and/or registered offic	e address on our rec	cords, enter the name of the new register	red
agent and/or the new registered office address here:	e nauress on our re-		
		\sim	
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Florida street address		
		, Florida	
	•	Zıp Code	
			he
accept the obligations of my position as registered agent a			

If Changing Registered Agent, Signature of New Registered Agent

11 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person_being adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Pable A Barragas	701 Brickell Kex	XIAdd
	·	Blud Suire 204	□Remove
		Miani FL 33131	□Change
			□Add
			□Remove
			□Change
			□Add
		SECRETAL A	2022 Remove
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lote: If the date inserted in this	block does not m	eet the applicab	e statutory filing	requirements, thi	s date will	not be l	isted as
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