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(Requestor's Name)
(Address)
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(City/State/Zip/Phone #)
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(Business Entity Name)
(Document Number)
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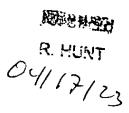
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COVER LETTER

Tallahassee, FL 32314

TO: Registration S Division of Co			,			
	quisitions IIc					
SUBJECT:						
	Name of Limited Liability Company					
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	alain curras					
		Name of Person				
	venture acquisitions llc					
		Firm/Company				
	15556 sw 47 ter				: 2	
	 .	Address			23	
	miami, fl 33185				າງ: 17 PH I:52	
		City/State and Zip Code			7	: Tag
	alaincurras@gmail.com			11-1 T100	H .	-
	E-mail address: (to be used for future annual report	notification)	四至	Ω. <u>.:.</u>	7.
For further information	concerning this matter, please ca	all:		ריין	1/2	
alain curras		786 239-8953	i			
Name	of Person	at () Area Code Day	ytime Telephone Num	ber	-	
Enclosed is a check for t	the following amount:					
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifi	icate of S ied Copy	Status &	
Mailing Addre		Street Address				
Registration Section Division of Corporations		Registration Division of O				
P.O. Box 633			of Tallahassee			

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

VENTURE ACQUISITIONS LLC			
(Name of the Lim	ited Liability Company as it now app (A Florida Limited Liability Compan	ears on our records.) y)	
The Articles of Organization for this Limited I Florida document number		10/27/22	_ and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	of the limited liability company	here:	
WAREHOUSE SOLUTIONS AND SUPPLIES L	LC		
The new name must be distinguishable and contain the	words "Limited Liability Company," th	ne designation "LLC" or the abbre	eviation "L.L.C."
Enter new principal offices address, if appli	cable:		
Principal office address MUST BE A STRE			-) -) -)
- Merim office may con 1700 - Da 11			
		2 D1	
Enter new mailing address, if applicable:		55	-1 .
Mailing address MAY BE A POST <u>OFFICE</u>		ιπτα [Π _{CD}	<u> </u>
Muning data cas MAT BEAT OUT OF THE			 -
			- 10
B. If amending the registered agent and/or agent and/or the new registered office addr		r records, enter the name o	of the new registe
Name of New Registered Agent:	ALAIN CURRAS		
New Registered Office Address:	15556 SW 47 TER.		
New Registered Office Address.	Enter	Florida street address	
	MIAMI	, Florida	5
	City	, , , , , , , , , , , , , , , , ,	Zin Code

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 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>	Address	Type of Action
			□ Remove
			□Change
			□Add
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factive data if other than the date of filings			(an	tional)		
fective date, if other than the date of filing:	prior to date of	filing or more th	an 90 days aft	ter filing.) Pursua	nt to 605.02
ote: If the date inserted in this block does not meet the approximent's effective date on the Department of State's record		itory Illing req	uirements, t	nis date	wiii no	t be listed
ecord specifies a delayed effective date, but not an effectivis is filed.	ve time, at 12	2:01 a.m. on the	e earlier of:	(b) Th	e 90th	day after th
APRIL 12 2023						
ted		$\overrightarrow{)}$				
Signature of a member or a	uthorized ron	recentative of a r	nember		_	

Typed or printed name of signee