L22000475378

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COVER LETTER

TO:

Registration Section

Division of Cor	porations		
Venture Ec	onomic Research		,
SUBJECT:	Property and the second	5.415.105.70	
	Name of Lin	ited Liability Company	
	4. 4 16.7	tu a e leat	
i ne enclosed Articles of	Amendment and fee(s) are sur	mitted for tiling.	
Please return all correspo	ondence concerning this matter	to the following:	
	Heidi DiCicco		
		Name of Person	
	Venture Economic Research CT: Name of Limited Liability Company Name of Limited Liability Company		
	Davenport, FL 33837		
	· · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
	= =		
For further information c		•	inotification)
Heidi DiCicco		_	2
Name o	f Person		lytime Telephone Number
Enclosed is a check for th	ne following amount:		
☐ \$25.00 Filing Fee		Certified Copy	Certificate of Status & Certified Copy
Mailing Addres Registration S		Street Addres Registration	
Division of C			Corporations
P.O. Box 632	•		of Tallahassee
Tallahassec, 1	FL 32314	2415 N. Mo	nroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Venture Economic Research LLC		
(Name of the Limited Liability Co (A Florida Lin	ompany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on 11-04-22	and assigned
Florida document number L22000475378		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
Venture Economics Research LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" o	r the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES.	<u>S)</u>	
		26
Enter new mailing address, if applicable:		22 22 22
(Mailing address MAY BE A POST OFFICE BOX)		FE OV
		E F
		SSE PE IT
B. If amending the registered agent and/or registered of	fice address on our records, <u>enter th</u>	
agent and/or the new registered office address here:		02
		1.1
Name of New Registered Agent:		
New Registered Office Address:		
The state of the s	Enter Florida street address	
	Flori	da
	City	Zip 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 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>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
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ın effective	date is listed, the date inserted in	nan the date of f date must be specified this block does roon the Department	c and cannot be pri not meet the appl	icable statutory fi	r more than 90 days a	ptional) after filing.) Pursuant this date will not	to 605.0207 be listed as
			t not an effective	time, at 12:01 a.r	n, on the earlier of	f: (b) The 90th da	y after the
cument's	cifies a delayed	effective date, but	t in an encoure				
record species filed.	rember 8) à	. 2022	·			
ecument's record spe is filed.		2à cu	. 2022	thorized representat	ive of a member		_