# L23000050338

(Re	questor's Name)	-
(Ad	dress)	_
(Ad	dress)	
(Cit	y/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

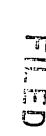
Office Use Only



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### **COVER LETTER**

TO: Registration Se Division of Cor						
SUBJECT: <u>VENTUF</u>	RECUZ, LLC Name of Lim	ited Liability Company				
The enclosed Articles of	Amendment and feers) are sub	mitted for filing.				
Please return all correspo	ondence concerning this matter	to the following:				
	Corpor	ate Maintenance Lea	d			
		Name of Person				
	Processing Department					
		Firm Company				
		1450 Vassar St				
	Reno, NV 89502					
		Ch. Talk and the				
		to be used for future annual report notific	unon) D			
For further information c	oncerning this matter, please ea	::II:				
	ing Department	at ( 800 ), 638-2320	- F			
Name o	(Person	Area Code Daytime	Telephone Number —			
Enclosed is a check for the	ne 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/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301





## \*\*\*IMPORTANT NOTICE\*\*\*

PLEASE SEND ALL DOCUMENTS –
APPROVED OR REJECTED TO THE ADDRESS
BELOW.

# INC AUTHORITY ATTN: CORPORATE MAINTENANCE LEAD

1450 VASSAR ST RENO, NV 89502

OR

RETURNDOCS@INCAUTHORITY.COM

### Cinc-Authority3

TO:

PHYSICAL: Dept. of State

Division of Corporations

Clifton Building

2661 Executive Center Circle

Tallahassee, FL 32301

MAILING:

Dept. of State

Division of Corporations

Corporate Filings P.O. Box 6327

Tallahassee, FL 32314

FROM:

Inc Authority, LLC

1450 Vassar St Reno NV 89502 (800) 638-2320 (775) 329-0852

DATE:

Wednesday, February 15, 2023

SENT VIA USPS

To Whom It May Concern:

Attached, please find the following document(s):

Articles of Amendment

For: VENTURECUZ, LLC

We have included payment in the amount of \$25.002 for the following fees:

Filing Fee

We have included one original and one copy.

If there are any questions, please call 800-638-2320

## Please return the file stamped copy of Amendment to Articles of Organization to the address below:

Processing Department 1450 Vassar St Reno NV 89502



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### **COVER LETTER**

TO: Registration Se Division of Cor				
SUBJECT: <u>VENTUE</u>	RECUZ, LLC Name of Lim	ited Liability Company		
	Amendment and fee(s) are sub	-		
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		Name of Person		
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		Firm Company	고등	023
		1450 Vassar St	提示する。 - 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1 × 1	1023 FEB 21
		Address	-	
		Reno, NV 89502	8.57 5.57 5.57	AM 8: 47
		ercy state and zip code	드웨	<b>կ 7</b>
	E-mail address: (	to be used for future annual report r	notification)	
For further information e	oncerning this matter, please c	all:		
Process	ing Department	at (800 , 638-232	20	
Name o	f Person	Area Code Day	time Telephone Number	
Enclosed is a check for the	he following amount:			
☑ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	of Status &

### MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FI, 32301

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

### VENTURECUZ, 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 01/26/23 and assigned Florida document number <u>L23</u>000050338 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." Enter new principal offices address, if applicable: 2013 Live Oak Blvd Ste N Unit 220 (Principal office address MUST BE A STREET ADDRESS) St Cloud, FL 34771 Enter new mailing address, if applicable: 2013 Live Oak Blvd Ste N Unit 220 St Cloud, FL 34771 (Mailing address MAY BE A POST OFFICE BOX) 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

#### 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>	<u>Address</u>	Type of Action
MGR	Angel Valeyron	2013 Live Oak Blvd_Ste N_Unit 220_	Add
		St Cloud, FL 34771	□ Remove
			⊡ Change
MGR_	Freddy Ramon Espinal	2013 Live Oak Blvd Ste N Unit 220	
		St Cloud, FL 34771	Remove
		Change	
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record specifies a delaye	Department of Stared	te's records.	ffective time, a	t 12:01 a.m.	2023 F	rlier
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Page 3 of 3

Filing Fee: \$25.00