13000350281

(Re	questor's Name)	
(Ad	dress)	
(Add	dress)	
(City	y/State/Zip/Phon	e #)
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(Do	cument Number)	
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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Div	ision of Cor	porations		
	AQUAM C	OFFEE, LLC		
SUBJECT:	<u></u>	Name of Limited Liability Company		
The enclosed	l Articles of	Amendment and fee(s) are sub	mitted for filing.	
		ndence concerning this matter		
	•	-		
		Yohai Harrus		
			Name of Person	
		AQUAM COFFEE, LLC		
			Firm/Company	
		150 NW 37ST		
			Address	
		MIAMI, FL 33127		
			City/State and Zip Code	 _
		tlvla@msn.com		
		E-mail address: (to be used for future annual report no	otification)
For further in	nformation co	oncerning this matter, please ca	all:	
MENACHE	M KLIER		310 7396529 at ()	
·	Name of	Person	Area Code Dayti	me Telephone Number
Enclosed is a	check for th	e following amount:		
		_		
≡ \$ 25.00 F	iling Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Section Status & Certificate of Status & Certified Copy (additional copy is enclosed)
Mai	ling Addres	q.	Street Address:	
Registration Section		Registration Section		
		orporations	Division of Co	•
P.C). Box 632	/	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AQUAM COFFEE, LLC

(Name of the Limited Liability Compan (A Florida Limited Li	y as it now appears on our records.) ability Company)	
The Articles of Organization for this Limited Liability Company vi Florida document number <u>L23000350281</u>	were filed on JULY 25, 2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	ity company here:	
VERIO COFFEE, LLC		
The new name must be distinguishable and contain the words "Limited Liability	y Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		ï
B. If amending the registered agent and/or registered office ad	ldress on our records, <u>enter the na</u>	me 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	
	, Florida _	Zip Code
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agree provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pr being filed to merely reflect a change in the registered office a company has been notified in writing of this change.	performance of my duties, and I am covided for in Chapter 605, F.S. Oi	n familiar with and r. if this document is

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
			□ Remove
		-	□Change
			□Add
		DRemove	
		□Change	
		□Add	
		□Remove	
			□Change
		□Add	
		Remove	
			□Change

. It amend	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
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(If an effect Note: If	e date, if other than the date of filing:
he record s ord is filed	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
Dated	1)26
	Signature of a member or authorized representative of a member
	YOHAI HARRUS
	Typed or printed name of signee

Filing Fee: \$25.00