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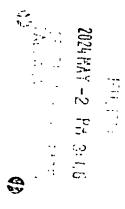
(Requestor's Name)
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PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
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COVER LETTER

TO:

TO: Registration Division of	i Section Corporations		
	VERETAIL LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.	
Please return all corre	espondence concerning this matter	to the following:	
	EDWIN DIAZ		
		Name of Person	
	EDWIN DIAZ		
		Firm/Company	
	6101 NE 3RD TER		
	-	Address	
	OAKLAND PARK ,FL 3.	3334	
		City/State and Zip Code	
	l.a.stardistribution2019@gr	nail.com to be used for future annual report notif	Scation)
For further information	on concerning this matter, please c	·	,
EDWIN DIAZ		954 8172175	
Nar	ne of Person		e Telephone Number
Enclosed is a check f	or the following amount:		
■ \$25,00 Filing Fe	e ☐ \$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)
P.O. Box	on Section f Corporations	Street Address: Registration Sec Division of Corp The Centre of T 2415 N. Monroe Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

ELILOVERETAIL LLC			
(Name of the Limited I	iability Compa Florida Limited	iny as it now appears on our records.) Liability Company)	_
The Articles of Organization for this Limited Liabi	lity Company	were filed on 03/28/2024 and	d assigned
Florida document number L24000151538	·		
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of th	e limited liab	pility company here:	
ELILOVERETAIL LLC			
The new name must be distinguishable and contain the words	s "Limited Liabi	lity Company," the designation "LLC" or the abbreviation	on "L.L.C."
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)		6101 NE 3RD TER	
		OAKLAND PARK, FL 33334	<u></u>
			30.32
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		6101 NE 3RD TER	77
		OAKLAND PARK, FL 33334	· .
		့် ယု	
B. If amending the registered agent and/or regi	stored office	2 6	
agent and/or the new registered office address h		address on our records, enter the name of the	e new registere
Name of New Registered Agent:	EDWIN DIAZ		
New Registered Office Address:	5101 NE 3RD	TER	
		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.

OAKLAND PARK

Edwin Diuz

If Changing Registered Agent, Signature of New Registered Agent

, Florida 33334

Zip Code

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	EDWIN DIAZ	6101 NE 3RD TER	≅ Add
		OAKLAND PARK, FL 33334	Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
	·		□ Remove
			□ Change
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Note:	tive date, if other than the date of filing:
e record	rd 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 iled.
Dated	04/23/2024
	Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member