## 624000174129

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## **COVER LETTER**

TO:

Registration Section

Division of Corporations		
BRAYO VALLE	ENAS VENTURES	LLC
nclosed Articles of Amendment and fee(s) are submitted for filing.  The return all correspondence concerning this matter to the following:  THE GORD VALLENAS  Name of Person  BRAYO SOLVE SOLVE  City/State and Zip Code  E-mail address: (to be used for future annual report notification)  There information concerning this matter, please call:  VORGE BRAYO  Name of Person  Area Code  Daytime Telephone Number  Sed is a check for the following amount:  25.00 Filing Fee  Certificate of Status  Certified Copy  (sadditional copy is enclosed)  Certified Copy  (sadditional copy is enclosed)		
Seed Articles of Amendment and fee(s) are submitted for filing.  Urn all correspondence concerning this matter to the following:    CREGORIO   VALLENAS     Name of Person		
Amendment and ree(s) are sub	mitted for ming.	
ndence concerning this matter	to the following:	
GREG	GORIO YALLEN	A S
	Name of Person	
BRAVO	P VALLENAS VENT Firm/Company	VRES LLC
910 BELLE	AVE SUITE 105	2 🕭
	Address	
	WINTER SPRINGS	FL 32708
	City/State and Zip Code	<u> </u>
E-mail address: (	RAVO ZS1080 @ H to be used for future annual report not	OTMAIL COM
oncerning this matter, please c	all:	
E BRAVO	at ( 303 ) 522	-7759
f Person	Area Code Daytin	ne Telephone Number
ne following amount:		
	Certified Copy	Certificate of Status & Certified Copy
	Street Address: Registration Se	ection
•	Division of Co	•
7 FL 32314		Tallanassee oe Street, Suite 810
	BRAYO VALLE Name of Lim  Amendment and fee(s) are sub indence concerning this matter  BRAYO  910 BELLE  Concerning this matter, please of Person  The following amount:  \$30.00 Filing Fee & Certificate of Status  Section Corporations  7	Amendment and fee(s) are submitted for filing.  Indence concerning this matter to the following:    GREGORIO   VALLENA     Name of Person

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

SICAVO VAUE	MAS YENTURU	ES LLC	_ <del></del>
(A Florida Lin	nited Liability Company)	ii our recoros.	
	pany were filed on <u>A</u>	ARIL 12, 20	24 and assigned
Florida document number <u>L 24000 174 129</u>		it now appears on our records.)  It filed on	
This amendment is submitted to amend the following:	s Limited Liability Company were filed on		
A. If amending name, enter the new name of the limited	(Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)  on for this Limited Liability Company were filed on APRIL 12, 2024 and assigned L 24000174129  ted to amend the following:  ter the new name of the limited liability company here:  ishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC"  es address, if applicable:  MUST BE A STREET ADDRESS)  ss, if applicable:  EA POST (OFFICE BOX)  Cered agent and/or registered office address on our records, enter the name of the new registered istered office address here:  Diffice Address:  Enter Florida street address  Florida		
The new name must be distinguishable and contain the words "Limited	Liability Company," the desig	gnation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:			<u>.</u>
(Principal office address MUST BE A STREET ADDRES	<u>(S)</u>		<u> </u>
	****		
			· ,
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			~~.
		.*	
B. If amending the registered agent and/or registered of	fice address on our reco	ords, <u>enter the nam</u>	ie of the new registered
agent and/or the new registered office address here:			
Name of New Registered Agent:			<del>-</del>
New Registered Office Address:			
	Enter Florida	street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent's Signature, if changing Registered Agent's Agent's Signature, if changing Registered Regi	gent:		

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
<u>AMBR</u>	GREGORIO VALLENAS	910 BEWE AXE SUITE 1052	<b>Æ</b> [Add
		WINTER SPRINGS FL 32708	□Remove
			□Change
			□Add
			□Remove
		<del></del>	□Change
<del></del>			□Add
		·	∴ □Remove
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ctive date, if other than the date of filin effective date is listed, the date must be specific an	ig: id cannot be prior to date of filir	(optional) ng or more than 90 days after filing.) F	ursuant to 605.02
: If the date inserted in this block does not iment's effective date on the Department of	meet the applicable statutor	y filing requirements, this date w	ill not be listed
ment y croon ve date on the isopatiment of	oute 5 records.		
ord specifies a delayed effective date, but no	ot an effective time, at 12:01	a.m. on the earlier of: (b) The	90th day after th
filed.			
. 1004 24	2024		
d APRIC 24	2024		
1	<del></del>		
to	member or authorized represe		