

L25000202612

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

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☐

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MAIL

(Business Entity Name)

(Document Number)

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*LLC
amend*

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Cover Letter

Name: Pedro Sivero

Return Address:

Valora Motors

Pedro Sivero

1516 Max Hooks Road, Suite I, Groveland, FL, 34736

Contact Information:

Cell #1: 407-752-0169

Cell #2: 407-717-6789

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COVER LETTER

**TO: Registration Section
Division of Corporations**

Valora Motors LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Pedro Sivero

Name of Person	
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Valora Motors

Firm/Company

1516 Max Hooks Road, Suite 1

Address

Groveland, FL, 34736

City/State and Zip Code _____

aventpw@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Pedro Sivero

407 752-0169

at ()

Area Code

752-0169

Daytime Telephone Number

Enclosed is a check for the 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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

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**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Valora Motors 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 04/29/2025 and assigned
Florida document number 1.25000202612.

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 "L.L.C."

Enter new principal offices address, if applicable:

1516 Max Hooks Road, Suite 1, Groveland, Florida, 34736

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

1516 Max Hooks Road, Suite 1, Groveland, Florida, 34736

(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:

1516 Max Hooks Road, Suite 1

Enter Florida street address

Groveland

City

Florida 34736

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

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SECURITY SERVICE
TULLAH, MISSISSIPPI

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

If the record 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 record is filed.

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00