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TO: Registration Se Division of Cor		The second section of the section of the section of the second section of the section of t	3.5
JRAA		*	
SUBJECT: OT V	'Name of Lin	nited Liability Company	· · · · · · · · · · · · · · · · · · ·
The enclosed Articles of	Amendment and fec(s) are sub	omitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	VIK PARTI	. ·	
		Name of Person	
	THE LAW O	FFICE OF VIK PA	ARTI PA
		Firm/Company	
	7380 SAND	LAKE ROAD SU	ITE 500
		Address	· · · · · ·
	ORLANDO,	FLORIDA 32819	
jan presentation (1970)	VPARTI@PARTI		
an Arin dy	E-mail address: (to be used for future annual report notifi	cation)
For further information ed	oncerning this matter, please ca	all:	
VIK PARTI		_{at} 321, 297-87	756
Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a check for the	e 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	City		Lip Code
		, Florida	
New Registered Office Address:	Enter Florida stre	et address	
Name of New Registered Agent:			
_			
egistered agent and/or the new registered office addre	ess here:	records, <u>enter the</u>	name of the n
3. If amending the registered agent and/or registe	ared office address on our	records enter the	name of the n
		13 % A 2 % A 2 6 6 5 4 4 4	
Mailing address MAY BE A POST OFFICE BOX)		1	
Enter new mailing address, if applicable:		<u> </u>	· · · · · · · · · · · · · · · · · · ·
			ਹਨ। ਹੈਹ
		3= :	776) 776) 776)
Principal office address MUST BE A STREET ADDRE	ESS)	P c	
Enter new principal offices address, if applicable:			
The new name must be distinguishable and end with the words "Limi	ited Liability Company," the designa	ntion "LLC" or the abbro	eviation "L.L.C."
JRAA VENTURES LLC			
A. If amending name, <u>enter the new name of the limit</u>	ed liability company here:		
This amendment is submitted to amend the following:			
Florida document number <u>L14000023052</u>	_•		
The Articles of Organization for this Limited Liability Co	ompany were filed on <u>02/10/2</u>	2014	and assigned
(<u>Name of the Limited Liability</u> (A Florida I			

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 the Managers or Authorized Member on our records, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

<u>Title</u>	<u>Name</u>	Address	Type of Action
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			□ Remove
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			70 TO
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			□ Remove

. If amending any othe	intormation, ente	r change(s) here:	(Attach additional s	hects, if necessary.)
		-		
Effective date, if other (The effective date must be specified the date this document is fill	secific, cannot be prior to	o date of receipt or filed	date and cannot be mon	(optional) e than 90 days after
Dated Februar	4 12	, 2014		
	,	91-		
	Signature o	f a member or authoriz	ed representative of a n	ember
	Vik	Part		
	<u> </u>	Typed or printed i	name of signee	

Page 3 of 3

Filing Fee: \$25.00