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COVER LETTER

		stration Sect sion of Corpo			
enn rez		3G Ventures	LLC		
SUBJEC	J1; _		Name of Lim	ited Liability Company	
			mendment and fee(s) are sub	- -	
Please re	turn a	all correspond	dence concerning this matter	to the following:	
			Taimi Fernandez-Guillot		
				Name of Person	
			3G Ventures LLC		
				Firm/Company	
			1 Juniper Drive		
				Address	
			Ocala, FL 34480		
			tguillot15@gmail.com	City/State and Zip Code	
				to be used for future annual report not	tification)
For furth	ner int	formation cor	ncerning this matter, please ca	all:	
Taimi F	ernan	dez-Guillot		at ()	
		Name of I	Person	Area Code Daytin	ne Telephone Number
Enclosed	l is a	check for the	following amount:		
■ \$2 5.	00 Fi	ling 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

Street Address: Registration Section Division of Corporations The Centre of Tallahassee

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

3G Ventures LLC		
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar	ny were filed on February 04, 2021	and assigned
lorida document number L21000061152		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited lia	ability company here:	
he new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		2007
		-0 ps
. If amending the registered agent and/or registered offic	e address on our records, enter the na	me of the new registe
gent and/or the new registered office address here:		7
		3
Name of New Registered Agent:		. <u>.</u> .
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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 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
MGR	Ivan J. Guillot Castro	11197 SE 29th Avenue	□Add
		Ocala, Fl. 34480	■Remove
		 	□Change
			□Add
			□Remove
			□Change
			
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			🗖 Add

And the second

D. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
•	
	
	
(If an effective Note: If the	February 05, 2021 (optional) date, if other than the date of filing: 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 ne date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the seffective date on the Department of State's records.
he record spe ord is filed.	ecifies 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 Apr	Fil27 2021
	Signature of a member or authorized representative of a member Taimi Fernandez-Guillot
	Typed or printed name of signee

Filing Fee: \$25.00