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(1	Requestor's Name)	·
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(1	City/State/Zip/Phone #	7)
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COVER LETTER

10:	Division of C			
SUBJ	ECT: Venturex	Management, L.L.C.		
			Limited Liability Compan	y
Limite	nclosed Article ed Liability Co 1045, F.S.	s of Conversion and f mpany" into an "Othe	ee(s) are submitted to e er Business Entity" in a	convert a Florida ecordance with
Please	return all corr	espondence concernir	ng this matter to:	
James	G. Burke			
		Contact Person		
Ventur	ex Management,	L.L.C.		
		Firm/Company		
3677 P	rovince Drive			
		Address		
Melbou	urne, FL 32934			
	C	ity, State and Zip Code		
jburke(@venturex.ws			
E-	-mail address: (to	be used for future annual	report notification)	
For fu	rther informati	on concerning this ma	atter, please call:	
James (G. Burke		$\underline{}$ at $(\frac{321}{})$	-8702
N	ame of Contact Po	erson		time Telephone Number
Enclos	sed is a check f	or the following amou	unt:	
= \$2 5.	00 Filing Fee	☐ \$30.00 Filing Fee and Certificate of Status	☐\$55.00 Filing Fee and Certified Copy	☐ \$60.00 Filing Fee, Certified Copy, and Certificate of Status
STREET ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301		MAILING A Registration Division of O P. O. Box 63 Tallahassee,	Section Corporations 27	

CR2E106 (07/14)

COVER LETTER

SUBJECT:		
To: Registration Section Division of Corporations Venturex Management. L.L.C. Name of Limited Liability Company The enclosed Articles of Amendment and fee(s) are submitted for filling. Please return all correspondence concerning this matter to the following: James G. Burke Name of Person Firm/Company 3677 Province Drive Address Melbourne. FL 32934 City/State and Zip Code Jourke Eventure x. w 5 E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: James G. Burke Name of Person To Rain address Name of Person To get the following amount: Substitute and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journel Submitted Liability Company Address Melbourne. FL 32934 City/State and Zip Code Journe		
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	not Corporations Inturex Management, L.L.C. Name of Limited Liability Company Iticles of Amendment and fee(s) are submitted for filing. correspondence concerning this matter to the following: James G. Burke Name of Person Firm/Company 3677 Province Drive Address Melbourne, FL 32934 City/State and Zip Code JOURKE QUENTUREX. WS E-mail address: (to be used for future annual report notification) mation concerning this matter, please call: Name of Person at (321 / Area Code) Daytime Telephone Number seck for the following amount: GER S30.00 Filing Fee & S55.00 Filing Fee & Certificate of Status & Certified Copy Certificate of Status & Certificate of Status & Certified Copy Certificate of Status & Certificate of Status & Certificate of Status & Certified Copy To the following amount: GER S40.00 Filing Fee. Certificate of Status & Certificat	
	Firm/Company	
	3677 Province Drive	
	Address	
	Melbourne, FL 32934	
	Division of Corporations Venturex Management, L.L.C. Name of Limited Liability Company To set a Articles of Amendment and fee(s) are submitted for filing. Peturn all correspondence concerning this matter to the following: James G. Burke Name of Person Firm/Company 3677 Province Drive Address Melbourne, FL 32934 City/State and Zip Code Journe Wenturex. WS E-mail address: (to be used for future annual report notification) Their information concerning this matter, please call: 3. Burke Name of Person Area Code Name of Person To set a se	
Fan Cashaa S		Name of Person Name of Person
ror turther i	ormation concerning this matter, please call:	
James G. B	321 480-8702 at (
The enclosed Articles of Amendment and fee(s) are submitted for filing. Please return all correspondence concerning this matter to the following: James G. Burke	_	
Enclosed is	check for the following amount:	
1	Artached Certificate of Status Certified Copy Certificate of S	tatus &
(Ment		

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 ANAL TO ARTICLES OF ORGANIZATION OF 2018 JUN 29 AM O.

Venturex Management, L.L.C.	Why is it now uppears on our electric \$7.75
(Name of the Limited Liability Compa (A Florida Limited)	Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number L01000018486	were filed on 10/25/2001 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	ility company here:
Burke Law Offices, PLLC	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	3677 Province Drive
	Melbourne, FL 32934
Enter new mailing address, if applicable:	
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limite Burke Law Offices, PLLC The new name must be distinguishable and contain the words "Limited Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRE.) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Same
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address her	ffice address on our records, enter the name of the new \underline{e} :
Name of New Registered Agent:	

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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.

City

If Changing Registered Agent, Signature of New Registered Agent

Enter Florida street address

_. Florida ___

If amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			Remove
			☐ Change
			Add
			Remove
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-	se of the Professional Limited Liability Company is to provide legal services and to conduct a			
lawfu	business activities.			
			_ -	
				
				
If an effective Note: If the document's he record	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 date inserted in this block does not meet the applicable statutory filing requirements, this date effective date on the Department of State's records. Specifies a delayed effective date, but not an effective time, at 12:01 a.m. of day after the record is filed.	g.) Pursuant e will not b	e listed	as the
Dated	20 2018			
	C. Volsake			
•	Agnature of a member or authorized representative of a member	≥ (n m	_ 2010	
	lames G. Burke, Manager	는 유 기관	NUL E	" "
-	Typed or printed name of signee	ASSE ASSE	N 29	
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Filing Fee: \$25.00