

LO2000032240

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

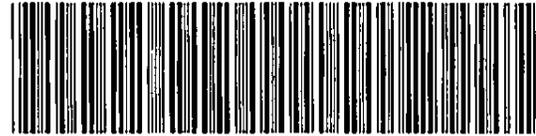
(Business Entity Name)

(Document Number)

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DEC 11 2017

JOHN D. CASSELS, JR., P.A.
LAURA ANN McCALL, P.A.

LAW OFFICE OF
CASSELS & McCALL *a Partnership of Professional Associations*

P. O. BOX 968 • 400 NW 2ND STREET • OKEECHOBEE, FL 34973 • TELEPHONE 863-763-3131 • FAX 863-763-1031 • E-MAIL mail@legal-one.com

December 7, 2017
via Federal Express

Secretary of State
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

RE: Venture Four, Inc.
Our File No: 15-8515

Dear Sir/Madame:

You will find enclosed herein an executed Articles of Amendment for Venture Four, I.L.C. Also enclosed is our firm's check in the amount of \$25.00 representing your filing fee.

Please return your letter of acknowledgment along with a filed copy of Articles of Amendment at your earliest convenience. Should you have any questions regarding this matter, please do not hesitate to contact my secretary, Karin.

With kindest regards, I am

Sincerely,



Laura Ann McCall

LAM/ka
Enclosures: As stated.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Venture Four, LLC
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:

Carlos M. Vergara
Name of Person
Okee-Hammock, Inc.
Firm/Company
7128 SE Rivers Edge Street
Address
Jupiter, FL 33458
City/State and Zip Code
cmvergara@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carlos M. Vergara at (561) 202-7188
Name of Person Area Code 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/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

Venture Four, 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 December 3, 2002 and assigned Florida document number L02000032240.

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: _____

(Principal office address MUST BE A STREET ADDRESS) _____

Enter new mailing address, if applicable: _____

(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: _____

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 Changing Registered Agent, Signature of New Registered Agent _____

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OFFICE OF THE CLERK
TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Okee-Hammock, Inc.	7128 SE Rivers Edge Street, Jupiter	<input checked="" type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Vergara, Carlos	7128 SE Rivers Edge Street, Jupiter	<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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 COUNTY OF JUPITER

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Multiple horizontal lines for amending information.

E. Effective date, if other than the date of filing: 08/31/15 (optional)

(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)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

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.

Dated December 7, 2017

Handwritten signature of Carlos Vergara

Signature of a member or authorized representative of a member

Okee-Hammock, Inc., by Carlos Vergara, President

Typed or printed name of signee

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