L04000008060

(Red	questor's Name)	,
(Add	dress)	<u> </u>
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(City	y/State/Zip/Phone	e #)
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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT:
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
JUSTINE HOO
Name of Person JBC VENTURES, LLC Firm/Company
4100 N. POWERLINE ROAD, #U4
POMPANO BEACH, FL 33073 City/State and Zip Code JUSTINE HOD @ YAHOO. COM E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
TUSTINE HOO at (954) 975 - 3777 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Solution}\$\$\ \text{Solution}\$\$\ \text{Certificate of Status}\$\$\$ Certificate of Status \$\ \text{Certified Copy}\$\$ (additional copy is enclosed) \$\ \text{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

FILED 12 JUL 23 ME 20

JBC VE	SECRET	ARY OF STATE SSEE, FLORIDA
(Name of the Limited Liability Compan (A Florida Limited Liability Compan)	y as it now appears on our records.) ability Company)	SSEE, FLORIDA
		,
The Articles of Organization for this Limited Liability Company v Florida document number L 040000 8060		and assigned
Tional document number		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
>> 1A	-	
The new name must be distinguishable and end with the words "Limite" "L.L.C."	ed Liability Company," the designation "LLC"	or the abbreviation
Enter new principal offices address, if applicable:	_N/A	
(Principal office address MUST BE A STREET ADDRESS)	-	
Enter new mailing address, if applicable:	N/A	
(Mailing address MAY BE A POST OFFICE BOX)		
P. If amonding the projectional and the state of the second secon		C 4b
B. If amending the registered agent and/or registered office address here:		tame of the new
Name of New Registered Agent:	Δ	
New Registered Office Address:	Enter Florida street address	
	, Florida	ip Code
New Registered Agent's Signature, if changing Registered Agent:	•	•
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent as pro- being filed to merely reflect a change in the registered office of company has been notified in writing of this change.	ete performance of my duties, and I am fo rovided for in Chapter 608, F.S. Or, if th	amiliar with and is document is

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager MGRM = Managing Member				
<u>Title</u>	<u>Name</u>	Address	Type of Action	
P/MGR	JUSTINE HOO	16560 SW FIRST STREET PEMBROKE PINES, FL 33017	Add Remove	
<u>P</u>	BRIETSTEIN, BARBARA	5922 NW 83rd Terrace PARKLAND, FL 33067	Add Remove	
	· 		Add Remove	
	·		Add Remove	
			Add Remove	
<u></u> .			Add Remove	
D. If amending		s) here: (Attach additional sheets, if necessary.)		
			· ·	
_			FILED 12 JUL 23 FM SECRETARY OF SECRETARY	
Dated	7/20 20 Museum Buets Signature of a member of	r authorized representative of a member	OF STATE	
_	BARBARA BRIETST	EIN & JUSTINE HOO Printed name of signee	··· ·	

Page 2 of 2

Filing Fee: \$25.00