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Special Instructions to	Filing Officer:	

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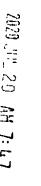


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COVER LETTER

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

Frostproof SUBJECT:	Developers JV, LLC		
	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please return all correspondent	ondence concerning this matter	to the following:	
	Robert Wohl		
		Name of Person	
		Firm/Company	
	20 N Lake Moody RD		
		Address	
	Frostproof, FL 33843		
	ccd.robert@gmail.com	City/State and Zip Code	
		to be used for future annual report no	otification)
For further information of	concerning this matter, please c	all:	
Robert Wohl		786 999 3632	
Name o	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for the	he 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 Addres		Street Address:	
Registration S Division of C		Registration S Division of Co	
P.O. Box 6327		The Centre of Tallahassee	

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jones JV, 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 12/06/2005 Florida document number L05000116158 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 ___

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.

City

If Changing Registered Agent, Signature of New Registered Agent

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

Title	Name	Address	Type of Action
·MGR	Robert Wohl	20 N Lake Moody RD, Frostproof, FL 33843	□Add
			= Remove
			□Change
MGR Frostproof Developers JV, LLC		20 N Lake Moody RD, Frostproof, FL 33843	= Add
			□Remove
			□Change
		□Add	
		□Remove	
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□Change
			□Add
			□Remove

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	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
(If an e <u>Note</u>	tive date, if other than the date of filing:
If the recorection	ord 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 filed.
Dated	July 2020
Buter	No los Signature of a member or authorized representative of a member
	Robert Wohl

Typed or printed name of signee