

L07000026391

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

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WAIT

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MAIL

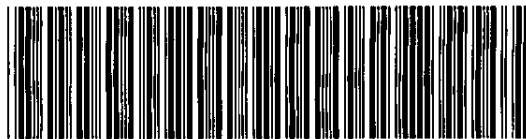
(Business Entity Name)

(Document Number)

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RECEIVED  
DEPARTMENT OF STATE  
DIVISION OF CORPORATE  
15 SEP - 3 AM 11:14  
TO ACKNOWLEDGE  
SUFFICIENCY OF FILING

FILED  
2015 SEP - 3 AM 9:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

SEP 04 2015  
J. HARRIS

CORPORATION SERVICE COMPANY  
1201 Hays Street  
Tallahassee, FL 32301  
Phone: 850-558-1500

ACCOUNT NO. : I20000000195

REFERENCE : 773556 149697A

AUTHORIZATION

COST LIMIT : \$ 25.00

ORDER DATE : September 3, 2015

ORDER TIME : 10:08 AM

ORDER NO. : 773556-005

CUSTOMER NO: 149697A

DOMESTIC AMENDMENT FILING

NAME: ROCK VENTURES, LLC

EFFECTIVE DATE:

XX ARTICLES OF AMENDMENT  
       RESTATED ARTICLES OF INCORPORATION

PLEASE RETURN THE FOLLOWING AS PROOF OF FILING:

       CERTIFIED COPY  
XX PLAIN STAMPED COPY  
       CERTIFICATE OF GOOD STANDING

CONTACT PERSON: Courtney Williams -- EXT# 62935

EXAMINER'S INITIALS: \_\_\_\_\_

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

ROCK VENTURES, 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 March 9, 2007 and assigned  
Florida document number L07000026391.

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 end with 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)

2016 SEP -3 AM 9:18  
SECRETARY OF STATE  
TALLAHASSEE FLORIDA

**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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
MGRM	Rock Properties, Inc.	145 Lincoln Ave Ste B	<input type="checkbox"/> Add
		Winter Park, FL 32789	<input checked="" type="checkbox"/> Remove
MGR	Rock Properties, Inc.	145 Lincoln Ave Ste B	<input checked="" type="checkbox"/> Add
		Winter Park, FL 32789	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated August 22, 2015.

  
Signature of a member or authorized representative of a member

Gregg Zuckerman  
Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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