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M. THOMAS

JUL 2 5 2008

**EXAMINER** 

## **COVER LETTER**

TO: · Registration S Division of Co			
SUBJECT: BRJ V	entures, LLC		<del></del>
		ited Liability Company)	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
			S.
	Sandra T. Lynn, Esq.		
		(Name of Person)	
	Turner & Lynn, P.A.		
		(Firm/Company)	OR JIII 24 MM 9: 5"
	830 North Krome Avenue	a	
	630 North Nome Avenue	(Address)	
	Alamanta d El 2000		
	Homestead, FL 33030	(City/State and Zip Code)	
For further information	concerning this matter, please c	all:	
Sandra T. Lynn, Esq.		at ( 305 ) 247-6521	
(Name of Person)		at ( 305 ) 247-6521 (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)	Certificate of Status & Certified Copy (additional copy is enclosed)
Regis Divis	LING ADDRESS: tration Section ion of Corporations Box 6327	STREET/COURIER Registration Section Division of Corporation Clifton Building	

2661 Executive Center Circle Tallahassee, FL 32301

P.O. Box 6327 Tallahassee, FL 32314

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

BRJ Ventures, LLC		
(Name of the Limited Lia (A Flo	bility Company as it now appears on our orda Limited Liability Company)	r records.)
The Articles of Organization for this Limited Liabil	B and assigned	
Florida document number L08000068453		
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of the	limited liability company have	8
A. If sinchding name, enter the new name of the	thurse thouse company here:	
The new name must be distinguishable and end with th	e words "Limited Liability Company," the	designation "LLC" or the abbreviations
•		
Enter new principal offices address, if applicable	:	
(Principal office address MUST BE A STREET ADDRESS)		93
	**************************************	<u>_</u>
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO)	n .	
12/2 maying promising states 222 ft a VIII VI A RAWA HVA		
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on our recaddress here:	ords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
TAGW REGISTERED Office Auditess.	(Enter Florida street address)	
_		, Florida
	(City)	(Zip Code)
New Registered Agent's Signature, if changing Regis	stered Agent:	
I hereby accept the appointment as registered as the provisions of all statutes relative to the prop- accept the obligations of my position as register being filed to merely reflect a change in the regi- company has been notified in writing of this char	er and complete performance of my a ed agent as provided for in Chapter ( stered office address, I hereby confir	uties, and I am familiar with and 08, F.S. Or, if this document is

Page 1 of 2

(If Changing Registered Agent, Signature of New Registered Agent)

. ILamending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records: MGR = Manager MGRM = Managing Member **Title** Name **Address Type of Action** MGR John J. Smith 377 SW Mauldin Avenue ■Z Add Lake City, FL 32024 Remove \_ Add ☐ Remove Add Remove Remo Add 🗖 Remove ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 2008 Dated Signature of a member or authorized representative of a member Louis R. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00