# L09 000107626

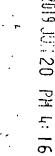
(Red	questor's Name)	
(Add	dress)	
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(City	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bus	siness Entity Nam	e)
(Doc	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	Filing Officer:	

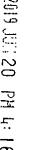
Office Use Only

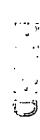


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R. WHITE JUN 28 2019







## **COVER LETTER**

	Registration Se Division of Coi			
SUBJEC	Livne Equi			
SOBJEC	·· <del></del>	Name of Lin	nited Liability Company	
The enclo	sed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please reti	urn all correspo	ondence concerning this matter	to the following:	
		Katic Romano		
			Name of Person	<del></del>
		Livne Equity LLC		
			Firm/Company	<del></del>
		4302 Hollywood Blvd #34	12	
			Address	
		Hollywood, FL 33021		
		<del></del>	City/State and Zip Code	
		Kromano@aventcapital.com	n to be used for future annual report notif	e.i.v.x
For further	r information c	oncerning this matter, please co	·	nearon)
Katie Ror	nano		954 895-0123 at ()	
	Name o	f Person	Area Code Daytime	e Telephone Number
Enclosed i	is a check for th	ne 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:

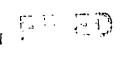
Registration Section Division of Corporations P.O. Box 6327

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



2019 进口20 PH 4:16

Livne Equity LLC	<u> </u>
(Name of the Limited Liability Company as it now appears on our records.) (A Florida Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Company were filed on 11/09/2009	and assigned
Florida document number L09000107626	

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 "LLC."

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 ne registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

4302 Hollywood Blvd #342

Finter Florida street address

Hollywood, FL

City

Tip 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 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 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>	Type of Action
MGR Amir Livne	Amir Livne	4302 Hollywood Blvd #342	
		Hollywood, FL 33021	■ Remove
			☐ Change
MGR Dorit Krauss Livne	Dorit Krauss Livne	4302 Hollywood Blvd #342	■ Add
		Hollywood, FL 33021	☐ Remove
			Change
MGR JCB One, LLC	JCB One, LLC	4302 Hollywood Blvd #342	□ Add
		Hollywood, FL 33021	■ Remove
			Change
		<del></del>	□ Add
			☐ Remove
			Change
	<del></del>		
			☐ Remove
			☐ Change
		<del></del>	C Remove
			☐ Change

D. If amending any other i	nformation, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	<del></del>
<del></del>	<del></del>
<del>-</del>	
<del></del>	
<del></del>	
Note: If the date inserted in	han the date of filing:(optional) date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)( in this block does not meet the applicable statutory filing requirements, this date will not be listed as the on the Department of State's records.
If the record specifies a c (b) The 90th day after t	delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: the record is filed.
Dated June 18	2019
	Signature of a member or authorized representative of a member
Amir Livne	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00