

L130000055331

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

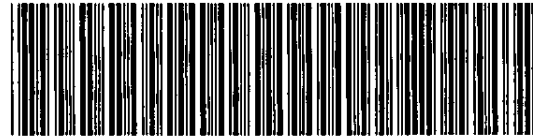
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Amend

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MAY 8 2013

2013 MAY -8 AM 8:25

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J. SAULSBERRY
EXAMINER

MAY 10 2013

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Novus Ventures LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Koljas E Lewis
Name of Person
Novus Ventures LLC
Firm/Company
1125 SW 122nd Ave
Address
Pembroke Pines, FL 33025
City/State and Zip Code
estlon@hotmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Koljas E Lewis at **(954) 418-2235**
Name of Person 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)
- \$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

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

Novus 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 04/16/2013 and assigned
Florida document number L13000055331

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STATE OF FLORIDA

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)

320 S Flamingo Rd
Suite 206
Pembroke Pines, FL 33027-1770

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

320 S Flamingo Rd
Suite 206
Pembroke Pines, FL 33027-1770

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 608, 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 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<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.)

Additional Articles of Incorporation included.

Dated May 6th, 2013

Koljas E Lewis

Signature of a member or authorized representative of a member

Koljas E Lewis

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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STATE OF MARYLAND
DEPARTMENT OF STATE

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Additional Articles of Organization

Article VII – Indemnification of Managers and Members

Section A

Under the current law, including any amendments hereafter, each manager shall be entitled to the fullest indemnification available to them.

Section B

Each manager shall be liable to the Company for the following actions:

1. The breach of the manager's or member's or member's loyalty to the Company, or its members.
2. To be liable hereunder, the manager in question must have acted in a malicious or grossly negligent manner, as defined by law.
3. A transaction in which the manager benefits to the detriment of the Company or its member
4. An action for which there is no indemnification provided by law.

Section C

This indemnification shall not deter or cancel out other rights to which the manager or member is entitled.

Article VIII – Management

The Company shall be managed by separate managers. The Company shall be considered manager-managed.

Article IX – Voting Rights

In regards to the voting rights, each member will be entitled a single vote for each percentage of membership the member has in the Company.

Article X – Charging Order Provision & Transfer of Membership Interests

The creditor or claimant shall only be considered an Assignee and shall have no right to become a Member or have rights to participate in the affairs of the Company nor have the right to participate as a Member or Manager in any regard.

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