## L130000 56572

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## COVER LETTER

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SHB IRC.	JVH REAL	ESTATE LLC			
SUBJEC	1:	Name of Lin	nited Liability Company		
The enclos	sed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please ren	arn all correspo	ondence concerning this matter	to the following:		
		CAROLINE HO			
			Name of Person	<del></del>	
		JVH REAL ESTATE LLC			
			Firm/Company		
		16599 SW 54 CT			
	Address				
	MIRAMAR, FL 33027				
			City/State and Zip Code	<del></del>	
		caroline.ccim@gmail.com	to be used for future annual report no		
For further	r information c	oncerning this matter, please c	·	utilication)	
VICTORI	A HSIEH		786 338-1363 Area Code Dayti		
	Name o	f Person	Area Code Dayti	me Telephone Number	
Enclosed i	s a check for th	ne following amount:			
<b>\$25.06</b>	) 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)	
	lailing Addres		Street Address: Registration S	ection	
D	Division of C O. Box 632	orporations	Division of Corporations The Centre of Tallahassee		
	allahassee, I			oe Street, Suite 810	

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JVH REAL ESTATE 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 April 17, 2013 \_ and assigned Florida document number \_\_\_\_L13000056572 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 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>	Address	Type of Action
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Effective	date, if other than the date of filing: (optional)  ve date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (
Note: If	the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as t
aocumen	's effective date on the Department of State's records.
e record s	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
rd is filed	
	September 24 2020
n	
Dated	
Dated	Signature of a member or authorized representative of a member

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