113000169411

(Re	questor's Name)	
(Ad	ldress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone #)	
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(Bı	usiness Entity Name)	
(Document Number)		
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N. CAUSSEAUX JAN 4 2019

COVER LETTER

DIVISION OF COL	porations		
JJ'S GRILI SUBJECT:	LE LLC		
SUBJECT:	Name of Lim		
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing	
		-	
Please return all correspo	ondence concerning this matter	to the following:	
	TREVOR K. BREWER		
	<u> </u>	Name of Person	
	BREWERLONG PLLC		
		Firm/Company	
	620 N WYMORE RD STI	£ 270	
		Address	
	MAITLAND, FLORIDA	32751	
	jj@jjsfusiongrille.com	City/State and Zip Code	
		to be used for future annual report notifi	cation)
For further information c	concerning this matter, please ca	all:	
TREVOR K. BREWER		407 660-2964 at ()	
Name (of Person	Area Code Daytime	Telephone Number
Enclosed is a check for t	he 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:

TO:

Registration Section

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 ARTICLES OF ORGANIZATION **OF**

ANTICLES	ORGANIZATION	
	OF	
JJ'S GRILLE LLC		
	npany as it now appears on our records.) ed Liability Company)	
The Articles of Organization for this Limited Liability Com Florida document number <u>1.13000169411</u>	my were filed on 12/06/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	iability company here:	
JJ'S CAPITAL VENTURES LLC		
The new name must be distinguishable and contain the words "Limited	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
B. If amending the registered agent and/or registered registered agent and/or the new registered office address		nter the name of the r
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	·
	EMET FIOFIAU SIFEEL AUGRESS	
	, Florid	a Zip Code
New Registered Agent's Signature, if changing Registered Ag	•	7.17
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compaccept the obligations of my position as registered agent being filed to merely reflect a change in the registered of company has been notified in writing of this change.	ete performance of my duties, and L as provided for in Chapter 605, F.S.	am familiar with and Or, if this document is
Īſ	hanging Registered Agent, Signature of Ne	w 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>	Address	Type of Action
			□ Change
			1
			Add _⊙
			Change
			□ Remove
			Change
			
		-	□ Remove
			Change
			□ Remove
			□ Change
			□ Remove
			☐ Change

D. If amending any other	er information, enter change(s) here	: (Attach additional sheets, if necessary	V 200
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E. Effective date, if othe (If an effective date is listed.)	er than the date of filing:	(optional) to date of filing or more than 90 days after filing.)	Pursuant to 605,0207 (3)
Note: If the date insert	ed in this block does not meet the applica	able statutory filing requirements, this date	will not be listed as the
document's effective da	ate on the Department of State's records.		
If the record enecifies	a delayed effective date, but not	t an effective time, at 12:01 a.m. (on the earlier of:
(b) The 90th day after		an enecuve time, at 12.01 a.m.	on the earner or.
Dated 12-7	, 2018	<u> </u>	
1	. 2018		
		rized representative of a member	
	Signature of a monitor of buttle		
JULIO J PA			
	Typed or printer	d name of signee	

Page 3 of 3

Filing Fee: \$25.00