L14000 147516

(R	equestor's Name)	
(A	ddress)	
(A	ddress)	
(C	ity/State/Zip/Phone#	9
PICK-UP	☐ WAIT	MAIL
(B	usiness Entity Name)
(Document Number)		
Certified Copies	Certificates o	f Status
Special Instructions to Filing Officer:		
<u>.</u>	Office Use Only	-



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15 FEB 11 AM 10: 00 RECEIVED ATIONS 2015 FEB 11 PM 3: 53

LEB 1 2 2015 J. HARRIS

COVER LETTER

Division of	Corporations				
	VENTURE THREE LLC				
SUBJECT:Name of Limited Liability Company					
The enclosed Article	s of Amendment and fee(s) are subr	mitted for filing.			
Please return all corr	espondence concerning this matter t	to the following:			
	CHRISTOPHER JAL	LLO			
		Name of Person			
		Firm/Company			
	PO BOX 2339				
		Address			
	OLDSMAR, FLORID	A 34677			
		City/State and Zip Code			
	CJALLO@OUTLOOK	COM o be used for future annual report notif	ication)		
			icanon,		
	on concerning this matter, please ca				
CHRISTOPHER JALLO Name of Person Name of Person Area Code Daytime Telephone Numb					
Na	me of Person	Area Code Daytime	e Telephone Number		
Enclosed is a check	for the following amount:				
\$25.00 Filing Fe	ce \$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)		

TO:

Registration Section

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

December 18, 2014

CHRISTOPHER JALLO PO BOX 2339 OLDSMAR, FL 34677

SUBJECT: J&C VENTURE THREE LLC

Ref. Number: L14000147516

We have received your document for J&C VENTURE THREE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The effective date must be specific and cannot be prior to the date of filing.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Jenna D Harris Regulatory Specialist II

Letter Number: 914A00026813

2015 FEB 11 PH 3: 53

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J&C VENTURE THREE LLC		
(Name of the Limited Lin (A Flo	ibility Company as it now appears on our records. orida Limited Liability Company))
The Articles of Organization for this Limited Liability Florida document number <u>L14000147516</u>	y Company were filed on 09/22/2014	and assigned
This amendment is submitted to amend the following	ŗ	
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:		20 TAL
(Principal office uddress MUST BE A STREET AL	DRESS)	SFEB II
Enter new mailing address, if applicable:		Y OF P
(Muiling address MAY BE A POST OFFICE BOX		3:53 3:53 STATE LORID
B. If amending the registered agent and/or registered agent and/or the new registered office a		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florída	
-	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 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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR ≈ Authorized Member

Title	Name	Address	Type of Action
MGR	CHAMOUN JALLO	1942 LAGO VISTA BOULEVARD	■ Add
		PALM HARBOR, FLORIDA 34685	🖸 Remove
MGR	JOHN JALLO	11551 FOUNTAINHEAD DRIVE	🗆 Add
		TAMPA, FL 33626	Remove
MGR	CHRISTOPHER JALLO	5332 MIRA VISTA DRIVE	Add
		PALM HARBOR, FL 34685	Remove
	•	·	 □ Add
·			2015 FEB 11 SEERETAR
			[17] ~ Western
	,		PM 3: 53
			_
			_D Add
			_□ Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	 -
	-
	_
E. Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)	_ Jale
Dated DECEMBER 10 , 2014	
Signature of a member or authorized representative of a member	
Chistopher Talles Chamour Jallo	

Page 3 of 3

Filing Fee: \$25.00

TILE:
2015 FEB 11 PM 3: 5: