L14000176498

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



100323901621

01/31/18--01022--003 **25.00

LEB O I SOLA

COVER LETTER -

TO: Registration Section Division of Corporation			7
SURJECT: NEU	Name of Limi	FUNDING LLC	
	Name of Limi	ited Liability Company	
			5
The enclosed Articles of Ar	mendment and fee(s) are sub-	mitted for filing.	Files 2
Please return all correspond	lence concerning this matter	to the following:	`=
	Herman	D. HERRING Name of Person	
	NEW VEN	TURE FUNDING Firm/Company	uc_
	522 SE 8	97 St. Old Town	FL. 32680
	Old TOWN	FL. 32680 City/State and Zip Code	
	6/6000	City/State and Zip Code	
	E-mail address: (t	ng & att. net	cation)
For further information con	cerning this matter, please ca		
H. DALE	IL ERRING	at (35Z) 356 · Area Code Daytime	-/099
Name of P	erson	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2.

NIEW WENTURE	FUNDING 110	7. 12 m
NEW VENTURE (Name of the Limited Light (A Flor	pility Company as it now appears on ida Limited Liability Company)	our records.)
(////	rou isimica isiasmy company	
The Articles of Organization for this Limited Liability		-13-2014 and assigned
Florida document number	<u>18</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the design	ation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u> </u>
(Principal office address MUST BE A STREET ADI	DRESS)	· · · · · · · · · · · · · · · · · · ·
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	 _	
B. If amending the registered agent and/or regressered agent and/or the new registered office ac		r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida si	reet 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 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:

MCD -	Managar	
MICIN -	Manager	
AMBR =	· Authorized Member	

<u>Title</u>	Name	Address	Type of Action
MGR	Robert Glenn Richa	des 1181 Osprey Nest Bint Orange Park, FL. 32073	X ∧dd
		Orange Park, FL. 32073	D Remove
			Change
			□ Add
			🗆 Remove
			Change
			□ Add
			□ Remove
			_□ Change
			_O Add
			Remove
			Change
			D Add
			Remove
			Change
			_D Add
			_□ Remove
			☐ Change

	ending any other information, enter change(s) here: (Attach additional sheets. if necessary.)
-	
-	
-	
-	
-	
-	
-	
-	
-	
_	
-	
-	
-	
-	<u> </u>
-	
-	
Note:	ive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated	1-28-2019 Signature of a member or authorized representative of a member
	Herman D. Herring Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00