

L15000041722

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

((H15000069841 3)))



H160000898413ABC1

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : HARRISON, SALE, MCCLOY
Account Number : 076630000526
Phone : (850) 769-3434
Fax Number : (850) 769-6121

Enter the email address for this business entity to be used for annual report mailings. Enter only one email address please.

Email Address: alevy@hsmclaw.com

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

15 MAR 19 PM 1:57

FILED

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
VENTIONEER, LLC

Certificate of Status	1
Certified Copy	0
Page Count	04
Estimated Charge	\$30.00

Electronic Filing Menu

Corporate Filing Menu

Help

MAR-19-2015 14:24

FROM-HARRISON, SALE, McCLOY & THOMPSON

HL5000069841 3

+7696121

T-807 P.002/005 F-087

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: VENTIONEER, 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:

ANDREW B. LEVY

Name of Person

HARRISON SALE McCLOY

Firm/Company

304 MAGNOLIA AVENUE

Address

PANAMA CITY, FL 32401

City/State and Zip Code

ALEVY@HSMCLAW.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

ANDREW B. LEVY

at (850) 769-3434

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

HL5000069841 3

MAR-18-2015 14:24

FROM: HARRISON, SALE, McCLOY & THOMPSON

H15000069841 3

+7696121

T-807 P.003/005 F-087

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

VENTIONEER, 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 MARCH 6, 2015 and assigned
Florida document number L15000041722

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)

411 LANTANA STREET

PANAMA CITY BEACH, FL 32407

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:

ANDREW B. LEVY

New Registered Office Address:

304 MAGNOLIA AVENUE

Enter Florida street address

PANAMA CITY

City

Florida 32401

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

Page 1 of 3

H15000069841 3

MAR-19-2015 14:24

FROM HARRISON, SALE, McCLOY & THOMPSON

+7686121

T-807 P.004/005 F-087

H15000069841 3

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	BRITTA TSCHIGGFREY	410 LANTANA STREET	<input type="checkbox"/> Add
		PANAMA CITY, FL 32407	<input checked="" type="checkbox"/> Remove
MGR	BRITTA TSCHIGGFREY	411 LANTANA STREET	<input checked="" type="checkbox"/> Add
		PANAMA CITY, FL 32407	<input type="checkbox"/> Remove
MGR	THOMAS J. DONOHUE	411 LANTANA STREET	<input checked="" type="checkbox"/> Add
		PANAMA CITY, FL 32407	<input type="checkbox"/> Remove
AMBR	GRETIL SILER	220 PINE RIDGE DR	<input type="checkbox"/> Add
		PANAMA CITY, FL 32405	<input checked="" type="checkbox"/> Remove
AMBR	GARY HALL	455 HARRISON AVE, SUITE D	<input type="checkbox"/> Add
		PANAMA CITY, FL 32401	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
MAR 19 11:17
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR-19-2015 14:25

FROM-HARRISON, SALE, McCLOY & THOMPSON

+7686121

T-807 P.005/005 F-087

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: _____ (optional)

(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)

Dated MARCH 19, 2015



Signature of a member or authorized representative of a member

ANDREW B. LEVY

Typed or printed name of signee

FILED
15 MAR 19 PM 4:57
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Page 3 of 3

Filing Fee: \$25.00

H15000069841 3