

LF5000054180

(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



400277334234

09/29/15--01005--012 \*\*25.00

FILED  
15 SEP 29 PM 4:02  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

SEP 30 2015  
S. YOUNG

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

NJM VENTURES 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 03/26/2015 and assigned  
Florida document number L15000054180.

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:**

2226 LAKE WORTH ROAD, #301

**(Principal office address MUST BE A STREET ADDRESS)**

LAKE WORTH, FL, 33461

**Enter new mailing address, if applicable:**

2226 LAKE WORTH ROAD, #301

**(Mailing address MAY BE A POST OFFICE BOX)**

LAKE WORTH, FL, 33461

**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:

2226 LAKE WORTH ROAD, #301

*Enter Florida street address*

LAKE WORTH

*City*

, Florida 33461MG

*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:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	NORMAN MANSOUR	2226 LAKE WORTH RD, #301	<input type="checkbox"/> Add
		LAKE WORTH, FL, 33461	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	ROBERT THOMAS POLLACK	2501 S OCEAN DR. #517	<input checked="" type="checkbox"/> Add
		HOLLYWOOD Florida 33019	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED  
 15 SEP 20 PM 03  
 SECRETARY OF STATE  
 TALLAHASSEE, FLORIDA

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated SEPTEMBER 25, 2015

Typed or printed name of signee

FILED  
15 SEP 29 PM 4:03  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA