(Requestor's Name)
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COVER LETTER

Div	ision of Corp	orations			
SHRIFCT:	Creative Join	nt Ventures LLC			
outrer.		Name of Limi	ted Liability Company		
The enclosed	l Articles of A	Amendment and fee(s) are subn	nitted for filing.		
Please return	all correspon	idence concerning this matter t	o the following:		
		Jacob S McBride			
Name of Person					
		Creative Joint Ventures, L1	.c		
Creative Joint Ventures, L1.C Firm/Company P O Box 9140 Address Bradenton, Fl 34206 City/State and Zip Code Celectricservice@aol.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Jacob S. McBride 1					
		P O Box 9140			
			Address		
		Bradenton, Fl 34206			
			City/State and Zip Code		
		· ·			
		E-mail address: (t	o be used for future annual report noti	fication)	
For further is	nformation co	ncerning this matter, please ca	II:		
Jacob S. Mo	Bride		941 524-2503 at ()		
	Name of	Person	Area Code Daytim	e Telephone Number	
Enclosed is a	a check for the	e following amount:			
\$25.00 E	filing Fee		Certified Copy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	

MAILING ADDRESS:

Registration Section

TO:

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

Creative Joint Ventures LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited l	ny as it now appears on our records.) Jability Company)	
The Articles of Organization for this Limited Liability Company Torida document number L15000072203	were filed on 04/15/2015	and assigned
forida document number		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited liab	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS)		SE 8
		(1)
	<u> </u>	— များ ယ များ
Or Aller Manufacture		
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		
. If amending the registered agent and/or registered of egistered agent and/or the new registered office address her Name of New Registered Agent:	-	nter the name of the
New Registered Office Address:	Enter Florida street address	
	, Florid	laZip Code
	·····	and conse

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>	Address	Type of Action
MGR	Jeff McBride		
		607 East Moore Street Bloomingdale, Ga 31302	■ Remove
			□ Change
Mgr	Jacob S McBride	715 Tropical Drive Bradenton, F1 34208	■ Add
			□ Remove
			Change
			□ Remove
			□ Change
			□ Add
			Remove
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			Add
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			Change

		
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fective date, if other than the date of filing:	(antional)	
Tective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date. If the date inserted in this block does not meet the applicable state.	te of filing or more than 90 days after filing.) Pursuant to	o 605.0
cument's effective date on the Department of State's records.	statutory ming requirements, and date will not be	, 11.7.00
	65 - 1' - 1' - 1 - 1 - 1 - 1 - 1 - 1 - 1 -	_ 11_
record specifies a delayed effective date, but not an The 90th day after the record is filed.	errective time, at 12:01 a.m. on the e	aniei
2018		
September 11th 2018		
	representative of a member	_

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Filing Fee: \$25.00