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(Re	questor's Name)	· ·
(Ad	dress)	·
(Ad	dress)	
(Cit	y/State/Zip/Phone	÷#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	
		:

Office Use Only



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COVER LETTER

TO:	Registration Se Division of Cor			
SUBJI	NCW LLC			
SUBJI	ECT:		nited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Chenenne N. Woods		
			Name of Person	
		NCW LLC		
			Firm/Company	
		11038 Coniston Way		
			Address	
		Windemere, FL 34786		
		chenenne@hotmail.com	City/State and Zip Code	
		•	to be used for future annual report notif	ication)
For fur	ther information co	oncerning this matter, please ca	all:	
Chener	nne N. Woods		407 2346812 at ()	
	Name of	Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	e following amount:		
■ \$2 <i>5</i>	5.00 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

FILED

2015 JUN 22 AM 8: 42

ARTICLES OF ORGANIZATION SECRETARY OF STATE,

OF

TALLAHASSEE, FLORID&

NCW LLC			
(Name of the Lin	ited Liability Compa (A Florida Limited)	nny as it now appears on our Liability Company)	records.)
he Articles of Organization for this Limited	Liability Company	were filed on May 8, 201	5 and assigned
lorida document number L15000082345			
	·		
his amendment is submitted to amend the fo	llowing:		
. If amending name, enter the new name	of the limited liab	ility company here:	
CW Ventures LLC			
ne new name must be distinguishable and contain the	words "Limited Liabi	lity Company," the designation	n "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if appl	icable:	11038 Coniston Way	
Principal office address MUST BE A STRE		Windemere, FL 34786	
- Thought office with each meet 22 1 Daile	21710211200		
			<u> </u>
nter new mailing address, if applicable:		104 Perry Street	
Aailing address MAY BE A POST OFFICE	E BOX)	3C	
<u> </u>	<u> </u>	New York, NY 20014	
			
. If amending the registered agent and	l/or registered of	ffice address on our re	cords, enter the name of the
gistered agent and/or the new registered			
Name of New Registered Agent:	Chenenne N. W	oods	
New Registered Office Address:	11038 Coniston	ı Way	
13011 Registered Office Address.		Enter Florida street	address
	Windemere		_, Florida ³⁴⁷⁸⁶
			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>	Address	Type of Action
MGR	Chenenne N. Woods	11038 Coniston Way	
		Windemere, FL 34786	□ Remove
			Change
AMBR	Nekeshia A. Woods	104 Perry Street	≅ Add
		Apt. 3C	a n
		New York, NY 10014	□ Change
	<u>`</u>		
			☐ Remove
			☐ Change
	·		Add
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Filing Fee: \$25.00