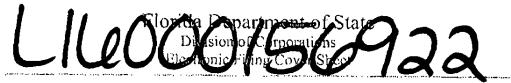
9/8/2016

Division of Corporations



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To:

Division of Corporations

Fax Number ; (850)617-6383

From:

Account Name : LARSON ACCOUNTING AND CONSULTING SERVICES OF LCC

Account Number : 120160000067 Phone : (407)370-3680

Fax Number : (407)370-3120

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

Email Address: consulting@larsonacc.com

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JVL CAPITAL LLC

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## **COVER LETTER**

TO:	Registration Se Division of Cor			
SUBJE	JVL CAPIT	'AL LLC		
301332		Name of Limi	ted Liability Company	
		Amendment and fee(s) are submitted this matter t	•	
		RENAN MESQUITA		
		<del></del>	Name of Person	····-
		LARSON ACCOUNTING	AND CONSULTING SERVICES L	.LC
			Firm/Company	<del></del>
		7901 KINGSPOINTE PKV	VY STE 17	
		<del></del>	Address	<del> </del>
		ORLANDO, FL 32819		
		<del></del>	City/State and Zip Code	
		consulting@larsonacc.com		
		E-mail address: (t	o be used for future annual report notific	gtion)
For furt	ther information c	ouceming this natter, please ca	11:	
CYRO	SANTIAGO RO	DRIGUES	407 3703686	
<del></del>	Name o	Person	at ()	elophone Number
Enclose	ed is a check for th	e following amount:		
<b>₽ \$2</b> 5	5.00 Filing Pec	☐ \$30.00 Filing Fcc & 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 Tailahassee, FL 32314 STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

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## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JVL CAPITAL LLC		· ··				
(Name of the Limited (A	Florida Limite	pany as it now appears d Liability Company)	on our records.)			
The Articles of Organization for this Limited Liab Florida document number L16000156922	ility Compar	ny were filed on	24/2016	and	ngisea l	.cd
This amendment is submitted to amend the follow	ring:					
A. If amending name, enter the new name of the	he limited lia	ibility company her	<u>'e</u> :			
N/A						
The new name must be distinguishable and contain the word	ds "Limited Lia	bility Company," the do:	signation "LLC" or t	he abbreviation	ı"L.L.C	, ,
Enter new principal offices address, if applicab	ole:	N/A		<u> </u>		
(Principal office address MUST BE A STREET ADDR)					ന്	
				28		1
				2013	င္မ	- Appendix
Enter new malling address, if applicable:		N/A				, <u>;</u>
(Mailing address MAY BE A POST OFFICE BOX)				, 11. LL.	玉	: # 5 :====;
				, SE	<del>- 2</del>	تر <sub>اید</sub> بریا
		<del></del>		<u>ē</u> m	ယ်	
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, <u>er</u>	iter the nai	me_of	the nev
Name of New Registered Agent:	N/A					
Now Registered Office Address:		Enter Flori	da street address			
		2000 2 7013				
		City	, Florid	AZip C	ode	
		- · · · ·		•		

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



If amending Authorized Person(s) authorized to manage, enter the fitte, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	JAAKOV FUHRMAN	1000 NE 12TH AVE APT 301	<b>=</b> Add
		HALLANDALE BEACH, FL	Remove
		33009	☐ Change
			C Add
			□ Remove
			Change
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fective date, if other than the date must ofer if the date in listed, the date must ofer if the date inserted in this blocument's effective date on the Department specifies a delayed. The 90th day after the reco	be specific and cannot be priced to does not meet the applications of State's record effective date, but n	cable statutory filing rec s.	mirements, this date wi	Il not be listed as
AUGUST 25th	2016		<u> </u>	
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		TOW TOWN THE TOWN TO THE TOWN	member	
	Signature of a member or aut	norized representative/or a	- 1	
CYRO SANTIAGO ROI		lionized representative/or a		8 A

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