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DET 23 2017 J. HARRIE

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: Koru Ventuses E5, 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:
Gresory Fischer Name of Person
Korn Ventures E5, LLC Firm/Company
18801 N. Dale Maby Huy
Lutz, FL. 33548 City/State and Zip Code
Cece Corte 6 b diver. com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Presury Fischer at (407) 223-2270 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Status Solution Status Status Solution Status Solution Status Status Status Solution Status Sta

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 ARTICLES OF ORGANIZATION OF

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Liability Company Florida document number <u>Libool & 2571</u> .	were filed on 9 3c 2c16 and assigned			
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liab	ility company here:			
The new name must be distinguishable and contain the words "Limited Liabil Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	ity Company," the designation "LLC" or the abbreviation "L.L.C." 15603 Stable Run Dive Spring Hill, FL. 34610			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Chris Hubbard 15603 Stable Run Drive Spring Hill, Fr. 34610			
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: 15603 Spr. ng	Stable Run drive Enter Florida street address Hill Florida 34610 Zip Code			
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	vee to act in this capacity. I further agree to comply with the performance of my duties, and I am familiar with and provided for in Chapter 605, F.S. Or, if this document is			
Page	1 of 3			

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 Title Name **Address** Type of Action Gregory Fischer 18801 N. Dale Malry Huyo Add Lutz, FL. 33548 DRemove MGR Christopher Hubbard 15603 Stable Run Drive WAdd Spring Hill FL 34610 Remove ☐ Change _□ Remove _□ Add _□ Remove _D Change

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	other information, enter change(s) here: (Attach additional sheets, if necessa	•	
			
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Note: If the date in document's effection	other than the date of filing:	te will not be li	sted as the
) The 90th day	after the record is filed.		
Dated Oct	ober 15 2017.		
$\overline{\bigcirc}$	W. St.		
	Signature of a member or authorized representative of a member	.a	201
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	Filing Fee: \$25.00	• 1	-