

L17000064006

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

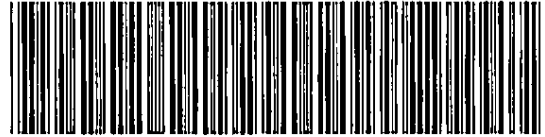
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



800306186098

12/07/17--01037--002 **25.00

FILED
17 DEC - 7 PM 3:16
RECEIVED OF STATE
TAL LHASSEE, FLORIDA

S. WARREN

DEC 08 2017

HODKIN STAGE WARD, PLLC

ATTORNEYS AT LAW

54 SW BOCA RATON BOULEVARD
BOCA RATON, FL 33432

TELEPHONE NO. 561.810.1600
FACSIMILE NO. 561.300.2128
www.hswlawgroup.com

December 5, 2017

VIA FEDEX: [7709 0783 8846]

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301


Re: Channe DeLuca Ventures, LLC

Dear Sir/Madam:

Enclosed are the following:

1. Cover letter with Articles of Amendment to Articles of Organization of Channe DeLuca Ventures, LLC;
2. Hodkin Stage Ward, PLLC check number 026031, payable to the Florida Department of State, in the amount of \$25.00.
3. Cover letter with Statement of Change of Registered Office or Registered Agent or Both for Limited Liability Company for Channe DeLuca Ventures, LLC;
4. Hodkin Stage Ward, PLLC check number 026032, payable to the Florida Department of State, in the amount of \$25.00.

Sincerely,


ADAM J. HODKIN
For the Firm

Encls.

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Channe DeLuca Ventures, 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:

Adam Hodkin

Name of Person

Hodkin Stage Ward PLLC

Firm/Company

54 SW Boca Raton Boulevard

Address

Boca Raton, FL 33432

City/State and Zip Code

ahodkin@hswlawgroup.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Hodkin

561 810-1600
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--------------------------------------------------------|------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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
ARTICLES OF ORGANIZATION
OF**

Channe DeLuca 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 March 22, 2017 and assigned
Florida document number L17000064006.

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

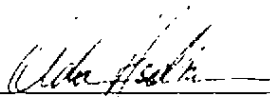
Name of New Registered Agent: Adam Hodkin

New Registered Office Address: 54 SW Boca Raton Boulevard
Enter Florida street address

Boca Raton, Florida 33432
City 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.


Adam Hodkin
If Changing Registered Agent, Signature of New Registered Agent

FILED
17 DEC - 17 PM 3:16
CLERK OF THE
STATE
OF FLORIDA

In 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>
MBR	JCD Investments, LLC	500 East Broward Blvd., St. 2300	<input type="checkbox"/> Add
		Ft. Lauderdale, FL 33394	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MBR	JCD Investment Ventures, LLC	500 East Broward Blvd., St. 230	<input checked="" type="checkbox"/> Add
		Ft. Lauderdale, FL 33394	<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
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

FILED
17 DEC - 7 PM 3:16
CLERK OF DISTRICT COURT
STATE OF 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.

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

(b) The 90th day after the record is filed.

Dated December 4 2017

Kavita Channe

Kavita Channe

FILED
17 DEC -7 PM 3:16
CLERK OF DISTRICT COURT
TALLAHASSEE, FLORIDA