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(Re	equestor's Name)	
(Ac	idress)	
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(Ci	ty/State/Zip/Phone	<del>:</del> #)
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## **COVER LETTER**

Division of Cor			
ONLIN THE CREE	OLDINGS LLC		
		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Sidney Roberts		
		Name of Person	<del></del>
	JV LTC HOLDINGS LLC		
		Firm/Company	<del></del>
	226 NOVA ROAD #396		
		Address	
	ORMOND BEACH, FL	32174	
		City/State and Zip Code	
	nginsparg@tikvahc.com		
	E-mail address: (	to be used for future annual report not	ification)
For further information c	oncerning this matter, please ca	all:	
Jacob Bengio		305 562-5501 at ()	
Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 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 ARTICLES OF ORGANIZATION OF

JV LTC HOLDINGS LLC		
( <u>Name of the Limited Liability Co</u> (A Florida Limi	mpany as it now appears on our records ted Liability Company)	<u>P)</u>
he Articles of Organization for this Limited Liability Compa	any were filed on 07/24/2017	and assigned
lorida document number L17000157986		
his amendment is submitted to amend the following:		
a. If amending name, enter the new name of the limited l	liability company here:	
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC"	" or the abbreviation "L.L.C."
Inter new principal offices address, if applicable:		19 <b>1</b>
Principal office address MUST BE A STREET ADDRESS	······································	2 TI
		. 6
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		ني 1قا
•		<del></del>
. If amending the registered agent and/or registered		, enter the name of the
egistered agent and/or the new registered office address l	<u>hęre</u> :	
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flo	orida Zin 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	Jill Tapia	226 NOVA ROAD #396	
		ORMOND BEACH, FL 32174	■ Add
		ORMOND BEACH, FL 32174	☐ Remove
			☐ Change
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			<u> </u>		
11/1 Effective date, if other than the date of filing:	1/2019	(	optional)		
If an effective date is listed, the date must be specific and cannot <b>Note:</b> If the date inserted in this block does not meet the	be prior to date of f	lling or more than 90 days	safter filing.) Pursu	ant to 605.	.0207
document's effective date on the Department of State's a		ory ming requirement	s, this date will h	or be liste	eu as
ne record specifies a delayed effective date, the 90th day after the record is filed.	but not an effe	ective time, at 12:	01 a.m. on th	e earlie	er of
Dated November 1 2019	9				
Loting W Ras	· · · · · · · · · · · · · · · · · · ·				
1 1 () (w)	41-1-	sentative of a member			

Page 3 of 3

Typed or printed name of signee

/ Filing Fee: \$25.00