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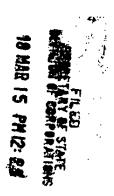
(Req	uestor's Name)	
(Add	ress)	
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(City)	/State/Zip/Phone	#)
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COVER LETTER

TO: Registration Se Division of Cor			
JVMC LLC SUBJECT:			
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of A	Amendment and fee(s) are subr	nitted for filing.	
Please return all correspon	ndence concerning this matter t	to the following:	
	William H VanArtsdalen		
		Name of Person	
	JVMC LLC		
		Firm/Company	
	1805 8th Ave W N 7		
		Address	
	Palmetto, FL 34209		
		City/State and Zip Code	
	floridarewest@gmail.com		
	E-mail address: (to	o be used for future annual report notific	eation)
For further information co	oncerning this matter, please ca	ll:	
William H VanArtsdaler	า	941 348-9272	
Name of	Person	at ()Area Code Daytime '	Telephone Number
Enclosed is a check for th	e 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

JVMC LLC			
(<u>Name of the Limite</u>	I Liability Compa A Florida Limited I	ny as it now appears on our re Liability Company)	<u>:cords.</u>)
The Articles of Organization for this Limited Lia Florida document number L17000212764	bility Company		
This amendment is submitted to amend the follow	wing:		
A. If amending name, enter the new name of	the limited liab	ility company here:	
			. 143
The new name must be distinguishable and contain the wo	rds "Limited Liabil	lity Company," the designation	"LLC" or the abbreviation "C
Enter new principal offices address, if applica	ble:		= = = = = = = = = = = = = = = = = = = =
(Principal office address MUST BE A STREET	ADDRESS)	•	
Enter new mailing address, if applicable:		1131 Palma Sola Bivd	PH RAIL
(Mailing address MAY BE A POST OFFICE B	OX)	Bradenton, FL 34209	·
B. If amending the registered agent and/o registered agent and/or the new registered offi	ce address here	<u>e</u> :	ords, enter the name of the new
Name of New Registered Agent:	William H Van	Artsdalen	
New Registered Office Address:	1131 Palma S	ola Blvd	
		Enter Florida street a	ddress
	Bradenton		, Florida <u>34209</u>
		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.

f 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
VP	/P Diehl, Joshua A	6301 Manatee Ave W	
		Bradenton, FL 34209	■ Remove
			☐ Change
			□ Add
		Aug.	Remove
			☐ Change
		 	☐ Remove
			☐ Change
			□ Remove
			□ Change
			Add
			Remove
			□ Agg
			□ Charac

amending any other information, enter change(s) here: (Attach additional sheets, if necessar) '
	
	
	<u>. </u>
	
ffective date, if other than the date of filing:	g.) Pursuant to 605.020
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. The 90th day after the record is filed.	on the earlier o
ated March 13, 2018.	18 HAR
Signature of a member or authorized representative of a member	
	PH 12:
William H VanArtsdalen, Jr.	

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Filing Fee: \$25.00