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COVER LETTER

.,	ration Se on of Cor	ction porations			
	cippers Ve	entures LLC			
SUBJECT:		Name of Lim	ited Liability Company	, , , , , , , , , , , , , , , , , , , 	
The enclosed A	rticles of .	Amendment and fee(s) are sub-	mitted for filing.		
Please return all	correspo	ndence concerning this matter	to the following:		
		John Morgan			
			Name of Persor)	· · · · · · · · · · · · · · · · · · ·
		Skippers Ventures LLC			
			Firm/Company		
	749 Saint Albans Drive				
	Address				
		Soca Raton, Florida 33486	is a second of the second of t		
			City/State and Zip C	lode	
		skippersventures@gmail.co			
For further infor	rmation co	e-mail address: (i oncerning this matter, please ca	to be used for future ar	пшаг героп понн	санов)
John Morgan			561	997-4536	
	Name o	f Person	at (Area Code	Daytime	Telephone Number
Enclosed is a cl	ieck for th	ne following amount:			
■ \$25,00 Fili	ng Fee	□ \$30,00 Filing Fee & Certificate of Status	S55,00 Filing Certified Cop (additional copy	vy	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	g Addres			et Address: gistration Sec	rtion
Divis	ion of C	orporations	Div	ision of Corp	porations
	Box 632 iassee, l	7 FL 32314		Centre of Tool No. Monroe	allahassee : Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Skippers Ventures LLC			
(Name of the Lim	ited Liability Company as i (A Florida Limited Liabilit	now appears on our records.) y Company)	
he Articles of Organization for this Limited I		filed on December 1, 2017	and assigned
orida document number L17000246752	. <u></u> .		
is amendment is submitted to amend the fol	lowing:		
If amending name, enter the new name	of the limited liability o	ompany here:	
tipper's Ventures LLC			
e new name must be distinguishable and contain the	words "Limited Liability Co	mpany," the designation "LLC" or the a	bbreviation "L.L.C."
nter new principal offices address, if appli	icable:		
rincipal office address MUST BE A STRE	ET ADDRESS)		
nter new mailing address, if applicable:			
			
<u>lailing address MAY BE A POST OFFICE</u>	<u> </u>	-,	
		- <u> </u>	
If amending the registered agent and/or	9	ss on our records, <u>enter the na</u>	ne of the new register
ent and/or the new registered office addr	ess here:		ţ = ``.
Name of New Registered Agent:	John J. Morgan Jr.		· · · · · · · · · · · · · · · · · · ·
New Designand Office Address			x
New Registered Office Address:		Enter Florida street address	- 1
			Zip Code'-
	€.	itv	zip coae 📜

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 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>	Type of Action
MGR	John J. Morgan Jr.		□∧dd
			Remove
			Change
			□Add
			□Remove
			Change
			\ _Add
			□Remove
			□Change
			□Remove
			□Change
			□Add
	•		Remove
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ective date, if other than the defective date is listed, the date mute: If the date inserted in this burnent's effective date on the E	st be specific and cannot be plock does not meet the app	olicable statutory filin	(optional ore than 90 days after filin g requirements, this dat	g.) Pursuant to 605,020
cord specifies a delayed effectiv s filed.	e date, but not an effectiv	e time, at 12:01 a.m. o	on the earlier of: (b) 1	the 90th day after the
ed July 21	. 2021	·		
011 0	More sufficient of a mentioer or a		•	