

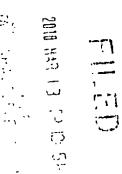
| (Req | uestor's Name) | |
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| PICK-UP | ☐ WAIT | MAIL |
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| Certified Copies | Certificates | of Status |
| Special Instructions to F | iling Officer; | |
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Office Use Only



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COVER LETTER

| TO: | | istration Sec ision of Corp | | | | |
|---------------|-------|--------------------------------|--|---|-------------------------|--|
| cub ira | ~r. | JWWB VE | NTURES, LLC | | | |
| SUBJE | U1: | | Name of Limi | ted Liability Company | | |
| | | | Amendment and fee(s) are submodence concerning this matter t | | | |
| | | | CHRISTOPHER P. KELL | EY | | |
| | | | | Name of Person | <u> </u> | |
| | | | CHRISTOPHER P. KELL | EY, P.A. | | |
| | | | | Firm/Company | | |
| | | | 11098 Biscayne Boulevard | , Suite 205 | | |
| | | | | Address | | |
| | | | Miami, FL 33161 | | | |
| | | | <u> </u> | City/State and Zip Code | 2 | 71. 201 |
| | | | INFO@CPKLAWPA.COM | | | 2018 15:13 |
| | | | E-mail address: (| to be used for future annua | il report notification) | |
| For furt | her i | nformation co | oncerning this matter, please ca | ıll: | | ساً لين آ |
| CHRIS | ТОР | HER P. KEL | LEY | . = = = | 93-6004 | T : |
| | _ | Name o | f Person | at () Area Code | Daytime Telephone N | Number UT |
| Enclose | d is | a check for th | ne following amount: | | | |
| ⊠ \$25 | .00 I | filing Fee | □ \$30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee Certified Copy (additional copy is e | nclosed) Co | 0.00 Filing Fee, ertificate of Status & ertified Copy Iditional copy is enclosed) |
| | | MAIL | ING ADDRESS: | | ET/COURIER ADDRI | ESS: |

Registration Section Division of Corporations

TO:

P.O. Box 6327 Tallahassee, FL 32314 Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JWWB 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 FEBRUARY 15, 2018 and assigned Florida document number _____L18000041789 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 "LLC." 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: 0 Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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 | JAMES W. BECKHAM | 12500 VERTUDES STREET | |
| | | CORAL GABLES, FL 33156 | _ ■ Remove |
| | | | Change |
| MGR | WILLIAM E. BECKHAM | 12500 VIRTUDES STREET | |
| | | CORAL GABLES, FL 33156 | Remove |
| | | | Change |
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| | ective date, if othe | r than the date o | of filing: | -vice to data of Gline | or more than 90 day | (optional) | Purcuant to 6 | 05 02C |
| ective date, if other than the date of filing: | te: If the date insert | ed in this block doe | es not meet the ap | oplicable statutory | filing requirement | is, this date | will not be lis | sted a |
| ective date, if other than the date of filing: | cument's effective da | ite on the Departme | ent of State's reco | ords. | | | | |
| dective date, if other than the date of filing: n 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 605.03 te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed cument's effective date on the Department of State's records. | record specifies | a delayed effec | ctive date, bu | t not an effect | ve time, at 12 | :01 a.m. (| on the ear | lier o |
| te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed cument's effective date on the Department of State's records. | The 90th day afte | er the record is | filed. | | | | | |
| te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed | MARCH | 9 | 2018 | | | | | |
| te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed cument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier 'he 90th day after the record is filed. | ted | 1)1 | · | 2//// | | | | |
| te: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed cument's effective date on the Department of State's records. record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier the 90th day after the record is filed. | | | 1// | | | | | |

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00