## 1180000 49176

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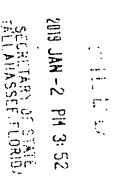
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## **COVER LETTER**

		COVER LETTER		
TO: Registration So Division of Co				1. 
SUBJECT: <u>Ĉ</u>	mar Ventures LL Name of Lim	C ited Liability Company	SOLD THE SECTION OF STATE OF S	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:	•••	
	- Fulei Ngo	Name of Person		
	Leimor	- Ventures, U.C. Firm/Company		
	8700 N	50th St. Aprt. 437		
		City/State and Zip Code		
	E-mail address: (	821 @ gmail . Com to be used for future annual report notifi	cation)	
For further information of	concerning this matter, please c	all:		
Noma o	Loanemoto f Posson	at (848) 391-65 Area Code Daytime	~90 Telephone Number	
Enclosed is a check for t	he 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**

ТО		<del>2</del>
ARTICLES OF ORG	GANIZATION	ي الم
OF		Con the
		2000
Leimar Ventures III		
(Name of the Limited Liability Company a	s it now appears on our records.)	بي
(A Florida Limited Liabi	nty Company)	6.4. 5
The Articles of Organization for this Limited Liability Company wer	e filed on <u>62 23 2018</u>	and assigned "
Florida document number <u>L 180000H9176</u> .		
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 C	Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
_	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
<del>-</del>		
B. If amending the registered agent and/or registered office	e 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:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	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.

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>	Name	Address	Type of Action		
MGR	Omar Passley	8700 H 55th St. Apr. 437			
		8700 H 55th St. Apr. 437 Tampa, FL 33617	Remove		
			Change		
			🗆 Remove		
			Change		
			Add		
			🗆 Remove		
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			🖸 Add		
			☐ Remove		
			Change		
			Add		
			□ Remove		
			Change		
			Remove		

☐ Change

). If ame	nding any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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(If an effe Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated_	Dec. 36d . 2018 .
	0
	Signature of a member or authorized representative of a member
	Tailor Han well a
	Typed or printed hame of signee

Page 3 of 3

Filing Fee: \$25.00