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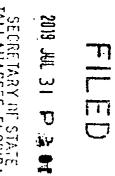
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COVER LETTER

Divi	sion of Corp	porations		
SUBJECT:	Horizon V	entures L.L.C.		
SOBJECT:		Name of Lim	ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspor	ndence concerning this matter	to the following:	
		Andrew F. Ford, Esq.		
			Name of Person	· ·
		Ford & Ford, P.A.		
		_	Firm/Company	
		100 Second Avenue Sout	h, Suite 900	
			Address	
		St. Petersburg, FL 33701		
		cheri.kuenn@fordpa.com	City/State and Zip Code	
			to be used for future annual report (notification)
For further in	formation co	oncerning this matter, please ca	all:	
Andrew F.	Ford, Esq.		727 894-2907	
	Name of	Person	Area Code Day	time Telephone Number
Enclosed is a	check for th	e following amount:		
■ \$25.00 Fi	lling 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:

TO:

Registration Section

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**

Horizon Ventures L.L.C.

(Name of the Limited Liability Company as it now appears on our repress)
(A Florida Limited Liability Company)

Florida document number L18000070466	·		CETCHATARY OF STATE. FALLAHASSEE. FLORING Assigned	
his amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	ility company here	:	
he new name must be distinguishable and contain the v	words "Limited Liabil	ity Company," the desi	gnation "LLC" or the abbreviation "L.L.C."	
Enter new principal offices address, if applic		151 Seventh Street South, Unit 848		
Principal office address MUST BE A STREE		St. Petersburg, FL 33701		
			2	
Enter new mailing address, if applicable:		151 Seventh Street South, Unit 848		
Mailing address MAY BE A POST OFFICE	BOX)	St. Petersburg, FL 33701		
			ur records, enter the name of the	
3. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	mice address her		I. L. II.	
registered agent and/or the new registered of New Registered Agent:		reet South. Unit 848		
egistered agent and/or the new registered o			street address	
Name of New Registered Agent:			street address, Florida = 33701 Zip Code	

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>	<u>Address</u>	Type of Action
MGR	Nathanael R. Salatin	430 Third Avenue South, Apt. 355	
		St. Petersburg, FL 33701	■ Remove
			Change
MGR	David J. Staab	247 Strawn	🗆 Add
		Kyle, TX 78640	■ Remove
			Change
			Remove
			Change
			□ Remove
			Change
			Remove
			Change
			🗖 Add
			□ Remove
			Change

amen	ling any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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f an effe Note: I	the date, if other than the date of filing: August 1, 2019 (optional) etive date is listed, the date must be specific and cannot be drior to date of filing or more than 90 days after filing.) Pursuant to 605.020 of the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a more seffective date on the Department of State's records.
e rec The	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 _	Signature of a member or authorized representative of a member
	Robert E. Davis, Manager

Page 3 of 3

Filing Fee: \$25.00