

14-Jan-2019 09:11

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1/4/2019

Division of Corporations

L19 000000849

Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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((H19000004050 3)))



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To:

Division of Corporations  
Fax Number : (850) 617-6303

From:

Account Name : SINGERED, KIPNIS, RIVERA, LERNER, DE LA TORRE, MOCARSKI PA  
Account Number : 076424000767  
Phone : (305) 442-3334  
Fax Number : (305) 442-3292

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: *juliaaunderswood@gmail.com*

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
4J VENTURES LLC

Certificate of Status	0
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Page Count	01
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T. CLINE

JAN 15 2019

EXAMINER

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Corporate Filing Menu

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## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: 4J VENTURES LLC.  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Julia A. Underwood  
Name of Person

Firm/Company

905 Bode Rigo Avenue  
Address

Coral Gables, FL 33134  
City/State and Zip Code

juliaaunderwood@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Julia A. Underwood at 305 305-6653  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the 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

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[H190000040503]  
**ARTICLES OF AMENDMENT  
 TO  
 ARTICLES OF ORGANIZATION  
 OF**

4J 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 Jan. 2, 2019 and assigned Florida document number H19000000849.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JY VENTURES LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

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:

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

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[H190000040503]

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>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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MGR  
AMBR

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[HP 0000040503]

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

[illegible]

**E. Effective date, if other than the date of filing:** \_\_\_\_\_ (optional)

(If an 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 285.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated JAN. 4, 2019

on the earlier of:

Signature of a member or authorized representative of a member

Julia A. Underwood  
Typed or printed name of signer

[HP:0000040503]

