# L2000048719

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# CAPITAL CONNECTION, INC.

417 E. Virginia Street, Suite 1 • Tallahassee, Florida 32301 (850) 224-8870 • 1-800-342-8062 • Fax (850) 222-1222

ng & Son Ventu	ires, LLC	
		Art of Inc. File
	****	LTD Partnership File
		Foreign Corp. File
		L.C. File
		Fictitious Name File
		Trade/Service Mark
		Merger File
		Art, of Amend, File
		RA Resignation
		Dissolution / Withdrawal
		Annual Report / Reinstatement
		Cert. Copy
		Photo Copy
		Certificate of Good Standing
		Certificate of Status
		Certificate of Fictitious Name
		Corp Record Search
		Officer Search
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		Vehicle Search
		Driving Record
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## **COVER LETTER**

Registration Section Division of Corporations

Tallahassee, FL 32314

TO:

7 L LES EEL C1991	Ventures, LLC		
SUBJECT:	Name of Limi	ted Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ndence concerning this matter	to the following:	
	Frank J. Aloia, Jr., Esq.		
		Name of Person	
	Aloia   Roland		
		Firm/Company	
	2222 Second Street		
		Address	
	Fort Myers, FL 33901		
	faloia@lawdefined.com	City/State and Zip Code	
	E-mail address: (	to be used for future annual report no	dification)
For further information c	oncerning this matter, please co	all:	
Frank J. Aloia, Jr.		239 791-7950 at ( )	
Name o	f Person	at () Area Code Daytin	ne Telephone Number
Enclosed is a check for the	ne 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 Fiting Fee. Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address		Street Address:	ection
Registration ! Division of C		Registration Solution of Co	
P.O. Box 632	•	The Centre of	Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

### **COVER LETTER**

то:	Registration Sec Division of Corp			
SUBJEC	King & Son	Ventures, LLC		
SUBJE	-1: <u> </u>	Name of Limi	ited Liability Company	<del>-</del>
The encl	osed Articles of a	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn all correspo	ndence concerning this matter	to the following:	
		Frank J. Aloia, Jr., Esq.		
			Name of Person	
		Aloia   Roland		
			Firm/Company	
		2222 Second Street		
			Address	
		Fort Myers, FL 33901		
			City/State and Zip Code	<del></del>
		faloia@lawdefined.com	to be used for future annual report notific	ation)
For furtl	ner information co	oncerning this matter, please co		,
Frank J.	Aloia, Jr.		239 791-7950 at ( )	
	Name of	f Person	Area Code Daytime	l'elephone Number
Enclose	d is a check for th	ne following amount:		
<b>≘</b> \$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 Addres Registration S	<del></del>	Street Address: Registration Sect	ion

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

TO:

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

#### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

King & Son Ventures, LLC		
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L20000048719	were filed on February 11, 2020	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC" o	
Enter new principal offices address, if applicable:		2020
(Principal office address MUST BE A STREET ADDRESS)		
		_
Enter new mailing address, if applicable:		三に
	<del></del>	~ ~
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter th</u>	e name of the new registere
Name of New Registered Agent:		
New Designation of October Address.		
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
	City	Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>:</u>	
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office	e performance of my duties, and provided for in Chapter 605, F.	I am familiar with and S. Or, if this document is

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	Jarrold L. King, Jr.,	105 Jefferson Avenue	□Add
		Lehigh Acres, FL 33936	■Remove
			Change
MGR	Jerrold L. King. Sr.	105 Jefferson Avenue	■Add
		Lehigh Acres, FL 33936	□Remove
			Change
			BAdd BAdd BAemove
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Tective date, if other than the an effective date is listed, the date in ote: If the date inserted in this ocument's effective date on the	ust be specific and block does not n	l cannot be prioneet the application	rable statutory	g or more than y filing requir	(optio 90 days after t ements, this	filing.) Pursu	iant to 605. ot be liste	.024 ed (
	ive date, but not	an effective t	ime, at 12:01	a.ni. on the e	arlier of: (b)	The 90th	day after	r th
record specifies a delayed effect is filed.  March 6		2020						
is filed.	Signature of a	12	onzed s name	ntalive of a me	5 L 2			

Filing Fee: \$25.00