

L70 000199404

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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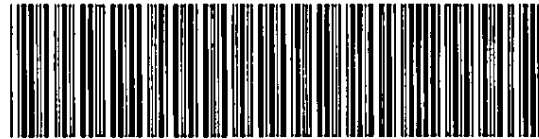
(Business Entity Name)

(Document Number)

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2020 NOV 18 PM 1:00

12/22/20  
[Signature]

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Love 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:

Aliana M Roman  
Name of Person

Love Ventures, LLC  
Firm/Company

3275 S John Young Parkway STE 604  
Address

Kissimmee, FL 34746  
City/State and Zip Code

alianamarior26@gmail.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Aliana M Roman at (321) 612-4731  
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 Address:**

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

Love 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 7/10/20 and assigned Florida document number L20000199404.

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 "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

3275 S John Young

Parkway STE 664

Kissimmee, FL 34746

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3275 S John Young

Parkway STE 664

Kissimmee, FL 34746

**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:

3275 S John Young Parkway STE 664

Enter Florida street address

Kissimmee

City

, Florida

34746

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.*

A. Roman

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>      | <u>Type of Action</u>                   |
|--------------|---------------|---------------------|-----------------------------------------|
| AMBR         | Luis Villegas | 3275 S John Young   | <input checked="" type="checkbox"/> Add |
|              |               | Parkway STE 664     | <input type="checkbox"/> Remove         |
|              |               | Kissimmee, FL 34746 | <input type="checkbox"/> Change         |
|              |               |                     | <input type="checkbox"/> Add            |
|              |               |                     | <input type="checkbox"/> Remove         |
|              |               |                     | <input type="checkbox"/> Change         |
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|              |               |                     | <input type="checkbox"/> Remove         |
|              |               |                     | <input type="checkbox"/> Change         |

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

Please add Luis Villegas as a member  
and amend all addresses on file to 3275 South  
John Young Parkway STE 664 Kissimmee, FL 34746  
Thank you! AR

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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 605.0207 (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 November 16, 2020

Ali Roman

Signature of a member or authorized representative of a member

Aliana M. Roman

Typed or printed name of signer

Luis Villegas