LZ1000097721

(Re	equestor's Name)	
(Ad	idress)	
•	,	
(Ad	ldress)	
(Cit	ty/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Na	me)
(De	ocument Number)	
Certified Copies	Certificate	s of Status
Special Instructions to	Filing Officer:	
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		05/04/21 TM
		*** 1

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COVER LETTER

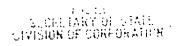
TO:

Registration Section

Division of C	orporations		
SUBJECT:	JADSKI VI	ENTURES, LLC	
SCBJECT.		ited Liability Company	
The enclosed Articles (of Amendment and fee(s) are sub	mitted for filing.	
Please return all corres	pondence concerning this matter	to the following:	
	JOS	PHINE ADUGALSKI	
		Name of Person	· · · · · · · · · · · · · · · · · · ·
	JAD	SKI VENTURES, LLC	
		Firm/Company	.
	6264 ALLIC	ATOR LAKE SHORE EAST	
		Address	-
	:	ST CLOUD FL 34771	
		City/State and Zip Code	
	E-mail address: (to be used for future annual report n	otification)
for further information	concerning this matter, please c	all:	
JOSEPHINE	ADUGAESKI	407 601-9548	
Name	of Person	at () Area Code Dayt	ime Telephone Number
Enclosed is a check for	the following amount:		
■ 825.00 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 radditional copy is enclosed)
<u>Mailing Addr</u> Registration		<u>Street Address:</u> Registration S	
Division of	Corporations	Division of C	orporations
P.O. Box 63 Tallahassee		The Centre of 2415 N. Mon	Tallahassee roe Street, Suite 810
	••• • • •		

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



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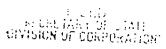
JADSF	KI VENTURES, LLC	•		
(Name of the Limited L (A 1	iability Company as it forida Limited Liability	now appears (Company)	on our records.)	
The Articles of Organization for this Limited Liabil Florida document number 1.21000097721		iiled on	02-27-2021	and assigned
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability co	ompany her	<u>e</u> :	
N/A				
The new name must be distinguishable and contain the words	"Limited Liability Con	pany," the des	agnation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable	e: <u>N A</u>			
(Principal office address MUST BE A STREET A	(DDRESS)			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO.)	<u>N A</u>			
B. If amending the registered agent and/or regis agent and/or the new registered office address he		s on our rec	cords, <u>enter the n</u>	ame of the new registered
Name of New Registered Agent:	N/A			
New Registered Office Address:		Enter Floria	la street address	
			Florida	
-	C	ίν.	Tiorida	Zip Code
New Registered Agent's Signature, if changing Regi	stered Agent:			
I hereby accept the appointment as registered as provisions of all statutes relative to the proper a accept the obligations of my position as register being filed to merely reflect a change in the regi company has been notified in writing of this cha	ind complete perfor ed agent as provid istered office addre	rmance of n ed for in Cl	vy duties, and La apter 605, F.S. (m familiar with and Or, if this document is

oc ID: 980fa216c52a7243f5ff56a7a90;dcd145b2716a

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



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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ADUGALSKI, ADAM	6264 ALLIGATOR LAKE SHORE EAST	
		SAINT CLOUD , FL 34771	Remove
			□Change
			
			DRemove
			□ Change
			□Add
			□ Remove
			□Change
			□Remove
			DbAC
			□Remove
		····	□Change
			□Remove
			Change

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· · · · · · · · · · · · · · · · · · ·	
ffective date, if other than the date of filing:	(optional)
an effective date is listed, the date must be specific and cannot be prior to date of film Sote: If the date inserted in this block does not meet the applicable statutory locument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective time, at 12:01 d is filed.	a.m. on the earlier of: (b) The 90th day after the
Dated MARCH 10 2021	
Josephine Adugalski	
Signature of a member or authorized represer	ntative of a member

Filing Fee: \$25.00