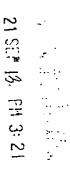


(Re	equestor's Name)	
(Ad	ldress)	
(Ad	ldress)	_
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	isiness Entity Nar	ne)
(Do	cument Number)	· · ·
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





09/13/21--01029--011 **25.00



COVER LETTER

TO:		istration Sec ision of Corp		
		Jove Goldma	an'and Vesta Properties LLC	•
SUBJI	ECT:		Name of Li	mited Liability Company
The en	closed	Articles of A	mendment and fee(s) are su	abmitted for filing.
Please	return	all correspon	dence concerning this matte	er to the following:
			Bentley, Thomas J	
			Jove Goldman and Vesta	Name of Person Properties LLC
			2088 Sunnyside Place	Firm/Company
			Sarasota, Florida 34239	Address
				City/State and Zip Code Flduran7@gmail.com (to be used for future annual report notification)
For fur	ther in	formation cor	scerning this matter, please	
Thema	is, Ben	itley J	34	941 374-0037 at ()
		Name of F	Person	Area Code Daytime Telephone Number
Enclose	ed is a	check for the	following amount:	
\$2	5. 00 Fi	iling Fœ	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certified Copy (additional copy is enclosed) □ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Reg Divi P.O.	ing Address: istration Se ision of Con Box 6327 ahassee, FL	rporations	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

Jove Goldman and Vesta Properties LLC

21 SEF -13 PH 3: 21

(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on ou ited Liability Company)	ır records.)
The Articles of Organization for this Limited Liability Comp Florida document number	any were filed on	21 and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	hability company here:	
The new name must be distinguishable and contain the words "Limited I	Liability Company," the designat	ion "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered off agent and/or the new registered office address here:	ice address on our records	s, enter the name of the new register
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stre	ret 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

or removed from our records:

MGR = Manager AMBR = Authorized Member Address - Not some taken at the Title Name | **Type of Action** MGR Frank Duran ■Add Remove □ Change _ 🗆 Add _ 🗆 Remove _____ Change ____ □Add Remove __ □Remove □ Change □Add Change □Add ☐ Remove □ Change

ng any other information, enter change(s) here: (Attach additional	21 55.
	
08/31/2021	(
ate, if other than the date of filing: date is listed, the date must be specific and cannot be prior to date of filing or	(optional) more than 90 days after filing.) Pursuant to 605.
e date inserted in this block does not meet the applicable statutory fil	
effective date on the Department of State's records.	
cifies a delayed effective date, but not an effective time, at 12:01 a.m	n. on the earlier of: (b) The 90th day after
1/2021	
7 1 2 1	
Signature of a member or authorized representati	

Typed or printed name of signee