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(Re	equestor's Name)	
(Ad	ldress)	
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PICK-UP	☐ WAIT	MAIL
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(Do	cument Number)	
Certified Copies	_ Certificate:	s of Status
Special Instructions to	Filing Officer:	

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COVER LETTER

Division of Cor	porations		
	Estate Ventures, LLC		
SUBJECT:	Name of Lim	ited 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:	
	Michael Martinez		
		Name of Person	
		Finn/Company	·
	7801 Jewt Lane		
		Address	
	Pensacola, Florida 32526		2004 J.W. CO
		City/State and Zip Code	
	mikemartinez43@yahoo.co		
	E-mail address: (to be used for future annual report notific	ation) - CO ·
For further information e	oncerning this matter, please c	all:	三
Michael Martinez		301 6535798 at ()	11. 20
Name o	f Person	Area Code Daytime	Felephone 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 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Address Registration	Section	Street Address: Registration Sect	
Division of C	Corporations	Division of Corpo	orations

P.O. Box 6327

Registration Section

TO:

Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

APEX Real Estate Ventures, LLC		
(<u>Name of the Limited Liability Company</u> as (A Florida Limited Liabili	it now appears on our records.) ty Company)	
The Articles of Organization for this Limited Liability Company were florida document number	e filed on February 28, 2023	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liability	company here:	
APEX Creative Ventures, LLC		
he new name must be distinguishable and contain the words "Limited Liability Co	ompany," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u>0 8</u>
Principal office address MUST BE A STREET ADDRESS)		
Enter new mailing address, if applicable:		8
Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office addragent and/or the new registered office address here:	ess on our records, <u>enter the na</u>	me of the new registo
Name of New Registered Agent:		<u> </u>
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

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>	Name	Address	Type of Action
			□Add
			□Remove
		·	☐ Change
			□Add
			□ Remove
			□ Remove Ghange Add Remove
			Remove
			□Change
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			□Remove
			□Change

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	111
	January 9, 2024
(If an c Note:	ve date, if other than the date of filing:
If the reco record is t	I 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 ed.
	January 8, 2024
Dated	• *

Filing Fee: \$25.00

Typed or printed name of signee