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COVER LETTER

TO:

Registration Section Division of Corporations

SUBJECT:	Venture Re	alty Company, ELC				
SUBJECT.		Name of Lim	ited Liability Company			
The enclosed	f Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return	all correspo	ndence concerning this matter	to the following:			
		Cody Sammons				
			Name of Person			
		Venture Realty Company,	LLC			
			Firm/Company			
		1415 Constitution Ct				
			Address			
		Jacksonville Beach, FL 32	250			20317
		<u> </u>	City/State and Zip C	ode		- ;
		VentureRealtyCo@gmail.co	nn -			ů,
		E-mail address: (to be used for future and	nual report notifi	cation)	
For further in	nformation c	oncerning this matter, please ca	all:			MID: 1:3
Cody Samm	ons		727 at ()	207-9543		- - - - - - - - - -
	Name o	l Person	Area Code	Daytime	Telephone Number	
Enclosed is a	a check for th	ne following amount:				
■ \$25.00 F	Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing I Certified Copy tadditional copy i	y	Certified (e of Status &
Rej Div P.C	iling Addres gistration S vision of C D. Box 632 Hahassee, I	Section orporations 7	Reg Divi The 241:	et Address: istration Sec sion of Corp Centre of Ta 5 N. Monroe ahassee, FL	oorations allahassee Street, Suite 81	0

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION OF

VENTURE REALTY COMPANY, 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 $\frac{4/12/2023}{2}$ and assigned Florida document number 1.23000181299 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 "LLC." Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS) ÚΊ Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registere

agent and/or the new registered office address here:

Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a	iddress
		Florida
	City	Zw 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
AP	Lauren Chapman	407 N ROSCOE BLVD	□Add
		PONTE VEDRA BEACH, FL 32082	■Remove
			□Add
			□Remove
			□Change
			GAdd □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □ □
			——— ∏Remove
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bedinent's effective date on the Dep.	arment of state s records.		
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John day after the recor	3.5 med.	• . • .;	36%
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, April 28			
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ated	ignature of a member or authorized represent	ative of a member	
ated	ignature of a member or authorized representa	ative of a member	-5 /110:43

Typed or printed name of signee