L24000392695

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COVER LETTER

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	egistration So ivision of Cor			
SUBJECT	-	enture LLC		
SUBJECT	.;	Name of Lim	nited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspo	ondence concerning this matter	to the following:	
		Jessica Geer		
			Name of Person	
			Finn/Company	
		3317 Olde Wharf Run		
			Address	
		Winter Park, FL 32792		
			City/State and Zip Code	
		Jessica.geer@gmail.com		
For further	information c	E-mail address: (oncerning this matter, please of	to be used for future annual report not all:	ilication)
Jessica Ge	er		321 277-9172 at ()	
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclosed is	s a check for th	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)
	lailing Addres		Street Address:	nation
Registration Section Division of Corporations			Registration Se Division of Co	
P	O. Box 632	7	The Centre of	
T	allahassee, I	FL 32314	2415 N. Monro	pe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED J. A. Geer Venture LLC (Name of the Limited Liability Company as it now appears on dur regards.) 6 Fit 1:06 The Articles of Organization for this Limited Liability Company were filed on 9/12/24 TATT ATTACHED OF STAPED assigned Florida document number 1.24000392695 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: J. A. Geer Ventures LLC 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) 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 registered agent and/or the new registered office address here: Name of New Registered Agent:

New Registered Agent's Signature, if changing Registered Agent:

New Registered Office Address:

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

Enter Florida street address

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>	Address	Type of Action
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