10/8/24, 9:49 AM

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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COVER LETTER

TO:	Registration Se Division of Cor			
eno ic	JRW CAPI			
SOMIN	CT:		ited Liability Company	÷.
The ene	losed Articles of	Amendment and fee(s) are sub	mitted for tiling.	
Please r	etum all correspo	ondence concerning this matter	to the following:	
		Mike Town		
			Name of Person	
		*Legalzoom com, Inc.		
			Firm/Company	
		9900 Spectrum Dr		
			Address	
		Austin, TX 78717		
			City/State and Zip Code	
		justinrwilliams.jw@gmail.c	com	
		E-mail address; (to be used for future annual report not	ification)
For furt	her information c	oncerning this matter, please of	all:	
Mike Town		800 773-0888 at ()		
	Name o	f Person	Area Code Daytin	ne Telephone Number
Enclose	d is a check for th	ne following amount		
□ \$25.	.00 Filing Fee	□ \$30,00 Filing Fee & Certificate of Status	SSS.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Contilicate of Status & Certified Copy (additional copy is enclosed)
	Registr Divisio P.O. Bo	ING ADDRESS: ation Section on of Corporations ox 6327 assee, FL 32314	STREET/COOR Registration Sector Division of Corpo Clifton Building 2661 Excentive Co	on rations

Tallahassee, FL 32301

Page: 4 of 6

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

(Name of the Limited Liability Company as it now a (A Florida Limited Liability Compa	ppears on our records.)
(А гона пятеннавичу сопр	my,
The Articles of Organization for this Limited Liability Company were filed or	n 09/18/2024 and assigned
Florida document number 1.24000406805	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liability compan	<u>ıv here</u> :
JRW Ventures & Co. LLC	
The new name must be distinguishable and contain the words "Limited Liability Company."	the designation "L.L.C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	202 4
(Principal office address MUST BE A STREET ADDRESS)	<u> </u>
	p. 00 11
	SO CO
Enter new mailing address, if applicable:	P IT
,	- C 49
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office address registered agent and/or the new registered office address here:	s on our records, <u>enter the name of the</u>
Name of New Registered Agent:	
New Registered Office Address:	
Estic	r Florida street address
·	, Florida
Cirv	Zip Code

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. Thereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

To: Page 5 of 6 2024-10-08 06:52:16 PDT LegalZoom ccm, Inc From: Candace Pringle

If amending Authorized Person(s) authorized to manage, enter the fitle, 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
		1.	
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Change
			□ Remove
			Change
	 		□ Add
			Change
			🗅 Add
			□ Remove
			☐ Change
			□ Add
			□ Remove
			Chanas

To:

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Typed or printed name of signer

Filing Fee: \$25.00

Signature of a member or authorized representative of a member

Justin Williams