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SECRETARY OF STATE

T. HAMPTON

COVER LETTER

	egistration Sec ivision of Corp					
CUD IECT	J3D Enter	rprises LLC				
SUBJECT	•	Name of Lim	ited Liability Company			
The enclos	ed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please retu	rn all correspon	dence concerning this matter	to the following:			
		David Browne				
			Name of Person			
		J3D Enterprises LLC				
Firm/Company						
		1888 NW 22 Street				
			Address			
		Pompano Beach, Fl	33069			
			City/State and Zip Code	•		
			nandoahconstruction.com to be used for future annual report notific	cation)		
For further	information co	ncerning this matter, please co	•			
Margare	t Lary		954 975-0098			
	Name of	Person	Area Code Daytime	Telephone Number		
Enclosed is	s a check for the	e 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 Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

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

J3D Enterprises LLC			
(Name of the Lim	ited Liability Company as it now appears of (A Florida Limited Liability Company)	n our records.)	
The Articles of Organization for this Limited I	Liability Company were filed on Decr	mber 18, 2006	_ and assigned
This amendment is submitted to amend the fol	lowing:		
A. If amending name, enter the new name	•	:	
The new name must be distinguishable and end with th	e words "Limited Liability Company," the des	ignation "LLC" or the abbr	eviation "L.L.C."
Enter new principal offices address, if appli	cable:		
(Principal office address MUST BE A STRE	ET ADDRESS)		+ > (/) -+ - (h) O1
		***	The sections
			(CONTRACT)
Enter new mailing address, if applicable:		y	
(Mailing address MAY BE A POST OFFICE	(BOX)		
		<u> </u>	
B. If amending the registered agent and registered agent and/or the new registered of	· ·	Ź	o inic
Name of New Registered Agent:	David Browne		
New Registered Office Address:	1888 NW 22 Street		
<u> </u>	Enter Florida	street address	
	Pompano Beach, FL	, Florida 3306	i9
	City	, 1 1/11/04	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 the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager AMBR = Authorized Member **Title Address Type of Action** <u>Name</u> Daniel DiMura 1888 NW 22 Street Mgr □ Add Pompano Beach, FL 33069 ■ Remove 1888 NW 22 Street Mgr **David Browne** Add Pompano Beach, FL 33069 □ Remove □ Add □ Remove □ Add □ Remove □ Add

☐ Remove

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Thom A Tacksu	date and cannot be more than 90 days after

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