## L1600032097

(Re	equestor's Name)	
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## **COVER LETTER**

TO: Registration S Division of Co		*	
	Homes, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	f Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Justin Levey		
	<del></del>	Name of Person	
	JB Harbor Homes, LLC		
		Firm/Company	
	P.O. BOX 1481		
	<del> </del>	Address	··· · · · · · · · · · · · · · · · · ·
	Palm Harbor, FL 34682		
	<del> </del>	City/State and Zip Code	<u> </u>
	justin@leveyland.com		
	E-mail address: (	to be used for future annual report notific	cation)
For further information	concerning this matter, please ca	ali:	
Justin Levey		727 512-7741 at ()	
Name	of Person	Area Code Daytime	Telephone Number
Enclosed is a check for	the 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

JB Harbor Homes, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records Liability Company)	.)
The Articles of Organization for this Limited Liability Company Florida document number L16000025027	were filed on February 05, 2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	ility Company," the designation "LLC"	or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	1356 Indian Trail N	
(Principal office address MUST BE A STREET ADDRESS)	Palm Harbor, FL 34683	
	P.O. BOX 1481	
Enter new mailing address, if applicable:	Palm Harbor, FL 34682	
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her  Name of New Registered Agent:  New Registered Office Address:		
	City , F10	rida Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	e performance of my duties, an provided for in Chapter 605, l	d I am familiar with and F.S. Or, if this document is

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

## 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>Address</u> **Type of Action Title** <u>Name</u> □ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove ☐ Change ☐ Add ☐ Remove

□ Ghange

☐ Remove

☐ Change

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Filing Fee: \$25.00