L17000035687

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (133.333) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| · - |
| |
| |
| |
| |
| |

Office Use Only



100293037801

FILED
2011 AUG 18 A II: 30
2016 AUG SEEFLORIDA

D BRUCE AUG 21 2017

FLORIDA FILING & SEARCH SERVICES, INC.

P.O. BOX 10662 TALLAHASSEE, FL 32302 155 Office Plaza Dr Ste A Tallahassee FL 32301 PHONE: (800) 435-9371; FAX: (866) 860-8395

DATE:

8/18/17

NAME:

JWC BARTRAM LLC

TYPE OF FILING: AMENDMENT

COST:

60.00

RETURN: CERTIFIED COPY AND GOOD STANDING PLEASE

ACCOUNT: FCA00000015

AUTHORIZATION: ABBIE/PAUL HODGE

Jobse Hohe

COVER LETTER

| TO: Registration So Division of Co | ection rporations | | |
|---------------------------------------|--|---|--|
| JWC Bartr | am LLC | | |
| SUBJECT: | Name of Lin | nited Liability Company | · |
| | Amendment and fee(s) are sub ondence concerning this matter | - | |
| | Robert J. Moriarty, Jr. | | |
| | | Name of Person | |
| | Marsh. Moriarty, Ontell & | Golder, PC | |
| | | Firm/Company | |
| | 18 Tremont Street, Suite 9 | 00 | 2011 JUG 18 A 11: 30 |
| | | Address | |
| | Boston, MA 02108 | | MASSEE A |
| | rmoriarty@mmoglaw.com | City/State and Zip Code | FLO |
| | • • | to be used for future annual report notif | fication) |
| For further information of | concerning this matter, please c | all: | <i>j.</i> - |
| Robert J. Moriarty, Jr. | | 617 778-5100 | |
| Name c | of Person | at () Area Code Daytima | c Telephone Number |
| Enclosed is a check for the | he following amount: | | |
| □ \$25.00 Filing Fee | S30.00 Filing Fee & Certificate of Status | ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fec, Certificate of Status & Certified Copy (additional copy is enclosed) |
| MAIL | INC ADDRESS | etpeet/couri | ED AINDLEGG. |

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 Taliahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| JWC Bartram LLC | | |
|--|--|---------------------------|
| (Name of the Limited Liability Co (A Florida Lim | ompany as it now appears on our records.) inted Liability Company) | |
| The Articles of Organization for this Limited Liability Comp Florida document number <u>L17000035687</u> | pany were filed on February 14, 2017 | and assigned |
| 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 t | the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | <u> </u> |
| (Principal office address MUST BE A STREET ADDRES | <u>S)</u> | 3.0. 65 |
| Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) | | LED A III: 30 |
| B. If amending the registered agent and/or registere registered agent and/or the new registered office address | ed office address on our records, <u>er</u> s here: | nter the name of the new |
| Name of New Registered Agent: | | |
| New Registered Office Address: | Enter Florida street address | |
| | , Florid | la Zip Code |
| | City | ир соос |

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------------------------------|---|--------------------|
| MGR | Prestor Giuliano Capital Partners LLC | 334 Broadway, Providence RI 02909 | ⊟ Add |
| | | | Remove |
| | | | Change |
| MGR | First American Exchange Company LLC | 215 South State Street, Sair Lake City, Utah, 84111 | |
| | | | ■ Remove |
| | | | Change |
| | | | O Add |
| | | | Remove ASSE Change |
| | | | D'Add T |
| | | | Remove |
| | | | □ Add |
| | | | □ Remove |
| | | | Change |
| | | | _ Add |
| | · | | Remove |
| | | | ☐ Change |

| | |
|--|--|
| • | ••• |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | |
| | AT A S |
| | |
| | |
| E. Effective date, if other than the date of filin (If an effective date is listed, the date imust be specific an Note: If the date inserted in this block does not document's effective date on the Department of | nd cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(I meet the applicable statutory filing requirements, this date will not be listed as the |
| 36 the manual and 35 and date and 36 at | date, but not an effective time, at 12:01 a.m. on the earlier of: |
| (b) The 90th day after the record is filed. | , |
| Dated Augus + | member or authorized representative of a member |

Page 3 of 3

Filing Fee: \$25.00