

M17000001444

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JSF Bruce B. Downs CMPI, LLC
Name of Foreign Limited Liability Company

Dear Sir or Madam:

The enclosed application, certificate and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Steven M. Querin

Name of Person

Johnson Smith Hibbard and Wildman

Firm/Company

PO Drawer 5587

Address

Spartanburg, SC 29304

City/State and Zip Code

tcorbin@johnsondevelopment.net

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Steven M. Querin at (864) 582-8121
Name of Person Area Code & Daytime Telephone Number

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314

Enclosed is a check for the following amount:

- \$25 Filing Fee \$30 Filing Fee & Certificate of Status \$55 Filing Fee & Certified Copy \$60 Filing Fee, Certificate of Status & Certified Copy

**APPLICATION BY FOREIGN LIMITED LIABILITY COMPANY TO FILE
AMENDMENT TO CERTIFICATE OF AUTHORITY TO TRANSACT
BUSINESS IN FLORIDA**

SECTION I (1-4 must be completed)

1. Name of limited liability Company as it appears on the records of the Florida Department of
State: JSF Bruce B. Downs CMPI, LLC

Enter new principal office 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) _____

2. The Florida document number of this limited liability company is: M17000001444

3. Jurisdiction of its organization: South Carolina

4. Date authorized to do business in Florida: 2/20/17

SECTION II (5-9 complete only the applicable changes)

5. New name of the limited liability company: JSF Bruce B. Downs, LLC
(must contain "Limited Liability Company," "L.L.C.," or "LLC.")

(If name unavailable, enter alternate name adopted for the purpose of transacting business in Florida and attach a copy of the written consent of the managers or managing members adopting the alternate name. The alternate name must contain "Limited Liability Company," "L.L.C." or "LLC.")

6. If amending the registered agent and/or registered officer 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 Office Address: _____
Enter Florida Street Address

_____, Florida _____
City Zip Code

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

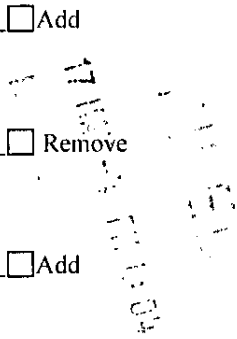
I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided 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

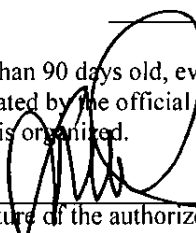
7. If the amendment changes the jurisdiction of organization, indicate new jurisdiction:

8. If the amendment changes person, title or capacity in accordance with 605.0902 (1)(e), indicate that change:

<u>Title/ Capacity</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add
_____	_____	_____	<input type="checkbox"/> Remove



9. Attached is a certificate, if required: no more than 90 days old, evidencing the aforementioned amendment(s), duly authenticated by the official having custody of records in the jurisdiction under the law of which this entity is organized.



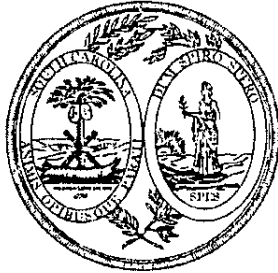
 Signature of the authorized representative

Steven M. Querin, Organizer

Typed or printed name of signee

Filing Fee: \$25.00

The State of South Carolina



Office of Secretary of State Mark Hammond

Certificate of Existence

I, Mark Hammond, Secretary of State of South Carolina Hereby Certify that:

JSF BRUCE B. DOWNS, LLC,
a limited liability company duly organized under the laws of the State of South Carolina on February 7th, 2017, with a duration that is at will, has as of this date filed all reports due this office, paid all fees, taxes and penalties owed to the State, that the Secretary of State has not mailed notice to the company that it is subject to being dissolved by administrative action pursuant to S.C. Code Ann. §33-44-809, and that the company has not filed articles of termination as of the date hereof.

Given under my Hand and the Great Seal
of the State of South Carolina this 3rd day
of May, 2017


Mark Hammond, Secretary of State

CERTIFIED TO BE A TRUE AND CORRECT COPY
AS TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

May 03 2017
REFERENCE ID: 1705030908377

Filing ID: 170503-0906091

Filing Date: 05/02/2017


SECRETARY OF STATE OF SOUTH CAROLINA

STATE OF SOUTH CAROLINA

SECRETARY OF STATE

AMENDED ARTICLES OF ORGANIZATION
LIMITED LIABILITY COMPANY -DOMESTIC

Pursuant to the 1976 S.C. Code of Laws, as amended, Section 33-44-204(a), the undersigned limited liability company
adopts the following amended articles of organization:

1. The name of the limited liability company is:

JF Bruce B. Downs, LLC

2. The date the articles of organization were filed is 02/07/2017

3. The articles of organization are amended in the following respects, of which all amended provisions may lawfully
be included in the articles of organization. If the space on this form is not sufficient, please attach additional sheets
containing a reference to the appropriate paragraph on this form.

Amended Entity Name: JSF Bruce B. Downs, LLC
Additional Amendment The Manager of JSF Bruce B. Downs, LLC is JSF Management, LLC, 100 Dunbar Street,
Suite 400, Spartanburg, SC 29306.

Signature: Signed as Organizer: Steven M. Querin

Capacity/Position of Person Signing (you must check one box):

Manager Member Organizer

Fiduciary Attorney-in-Fact

Steven M. Querin

(Print or Type Name)

Date: 05/02/2017

CERTIFIED TO BE A TRUE AND CORRECT COPY
AS TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

May 03 2017
REFERENCE ID: 1705030908377


MARK HAMMOND
SECRETARY OF STATE OF SOUTH CAROLINA

Filing ID: 170502-0929439

Filing Date: 05/01/2017

STATE OF SOUTH CAROLINA

SECRETARY OF STATE

AMENDED ARTICLES OF ORGANIZATION
LIMITED LIABILITY COMPANY - DOMESTIC

Pursuant to the 1978 S.C. Code of Laws, as amended, Section 33-44-204(a), the undersigned limited liability company adopts the following amended articles of organization:

1. The name of the limited liability company is:

JSF Bruce B. Downs CMPI, LLC

2. The date the articles of organization were filed is 02/07/2017.

3. The articles of organization are amended in the following respects, of which all amended provisions may lawfully be included in the articles of organization. If the space on this form is not sufficient, please attach additional sheets containing a reference to the appropriate paragraph on this form.

Amended Entity Name: JF Bruce B. Downs, LLC
Additional Amendment The Manager of JSF Bruce B. Downs, LLC is JSF Management, LLC, 100 Dunbar Street, Suite 400, Spartanburg, SC 29306.

Signature: Signed as Organizer: Steven M. Querin

Capacity/Position of Person Signing (you must check one box):

- Manager Member Organizer
 Fiduciary Attorney-In-Fact

Steven M. Querin

(Print or Type Name)

Date: 05/01/2017

CERTIFIED TO BE A TRUE AND CORRECT COPY
AS TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

Filing ID: 170207-1611054

Filing Date: 02/07/2017

May 03 2017
REFERENCE ID: 1705030908377


SECRETARY OF STATE OF SOUTH CAROLINA

STATE OF SOUTH CAROLINA
SECRETARY OF STATE

ARTICLES OF ORGANIZATION
Limited Liability Company – Domestic

The undersigned delivers the following articles of organization to form a South Carolina limited liability company pursuant to S.C. Code of Laws Section 33-44-202 and Section 33-44-203.

1. The name of the limited liability company (Company ending must be included in name)

JSF Bruce B. Downs CMPI, LLC

*Note: The name of the limited liability company must contain one of the following endings: "limited liability company" or "limited company" or the abbreviation "LLC", "LLC", "L.C.", "LC", or "Ltd. Co."

2. The address of the initial designated office of the limited liability company in South Carolina is
100 Dunbar St., Suite 400

(Street Address)

Spartanburg, South Carolina 29306

(City, State, Zip Code)

3. The initial agent for service of process is

Johnson Development Associates, Inc.

(Name)

(Signature of Agent)

And the street address in South Carolina for this initial agent for service of process is:
100 Dunbar St., Suite 400

(Street Address)

Spartanburg

South Carolina 29306

(City)

(Zip Code)

4. List the name and address of each organizer. Only one organizer is required, but you may have more than one.

(a)

Steven M. Querin

(Name)

220 N Church St., Suite 4

(Street Address)

Spartanburg, South Carolina 29306

(City, State, Zip Code)

CERTIFIED TO BE A TRUE AND CORRECT COPY
AS TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

May 03 2017

REFERENCE ID: 1705030908377

Mark Howard
SECRETARY OF STATE OF SOUTH CAROLINA

JSF Bruce B. Downs CMPI, LLC

Name of Limited Liability Company

(b)

(Name)

(Street Address)

(City, State, Zip Code)

5. Check this box only if the company is to be a term company. If the company is a term company, provide the term specified. _____
6. Check this box only if management of the limited liability company is vested in a manager or managers. If this company is to be managed by managers, include the name and address of each initial manager.

(a)

(Name)

(Street Address)

(City, State, Zip Code)

(b)

(Name)

(Street Address)

(City, State, Zip Code)

7. Check this box only if one or more of the members of the company are to be liable for its debts and obligations under Section 33-44-303(c). If one or more members are so liable, specify which members, and for which debts, obligations or liabilities such members are liable in their capacity as members. This provision is optional and does not have to be completed.

8. Unless a delayed effective date is specified, these articles will be effective when endorsed for filing by the Secretary of State. Specify any delayed effective date and time _____.

CERTIFIED TO BE A TRUE AND CORRECT COPY
AS TAKEN FROM AND COMPARED WITH THE
ORIGINAL ON FILE IN THIS OFFICE

May 03 2017
REFERENCE ID: 1705030908377


SECRETARY OF STATE OF SOUTH CAROLINA

JSF Bruce B. Downs CMPI, LLC

Name of Limited Liability Company

9. Any other provisions not consistent with law which the organizers determine to include, including any provisions that are required or are permitted to be set forth in the limited liability company operating agreement may be included on a separate attachment. Please make reference to this section if you include a separate attachment.

10. Each organizer listed under number 4 must sign.

Steven M. Querin

Signature of Organizer

Date: 02/07/2017

Signature of Organizer

Date: _____