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SECRETARY OF STATE DIVISION OF CORPORATION

T. HAMPTON

MAR 3 1 2011

EXAMINER

COVER LETTER

TO: Registration Section					
Division of Corporations					
SUBJECT: JOM Innovators Grow TH Fund, LTO					
Name of Florida Limited Partnership or Limited Liability Limited Partnership					
The enclosed Certificate of Amendment and fee(s) are submitted for filing.					
Please return all correspondence concerning this matter to:					
Ma/colm Brown					
Malcolm Brown Contact Person BSquared Investment Group LLC Firm/Company 4808 S. H. D. J. J. J.					
Firm/Company					
4808 SW 72nd Ave					
Address					
Firm/Company 4808 SW 72nd Aug Address Minn, FL 33155 City, State and Zip Code					
City, State and Zip Code					
E-mail address: (to be used for future annual report notification)					
E-mail address: (to be used for future annual report notification)					
For further information concerning this matter, please call:					
M4/co/n Brown at (786) 303-2447 Name of Contact Person Area Code and Daytime Telephone Number					
Name of Contact Person Area Code and Daytime Telephone Number					
Enclosed is a check for the following amount:					
\$52.50 Filing Fee and Certificate of Status \$105.00 Filing Fee Certified Copy, and Certificate of Status					
STREET ADDRESS: MAILING ADDRESS:					
Registration Section Registration Section					
Division of Corporations Division of Corporations					

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

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

CERTIFICATE OF AMENDMENT TO CERTIFICATE OF LIMITED PARTNERSHIP OF

Insert name currently on file	Growth Fund LTD with Florida Department of State
	tte was filed with the Florida Department of State on da document number A070000/3/2
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin here:	nited partnership or limited liability limited partnership
New name must be distinguishal	ole and contain an acceptable suffix.
Acceptable Limited Partnership suffixes: Limited Partnership Acceptable Limited Liability Limited Partnership suffixes: Lin	
B. If amending mailing address and/or principal office address here:	office address, enter new mailing address and/or
New Principal Office Address: (Must be STREET address)	4808 SW 72nd Avenue Miami, FL 33/55
New Mailing Address: (May be post office box)	4808 SW 72nd Avenue MiAMI, FL 33155
C. If amending the registered agent and/or registered new registered agent and/or the new registered office	ed office address on our records, enter the name of the address here:
Name of New Registered Agent:	steban Brown
New Registered Office Address:	907 SW 115 Place Unit 5
	Migm, Florida 33/73 CST
	Ξ ⊇s

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

	provisions of all statutes relat h and accept the obligations of	my position as registered age	te performance of my duties, and I tent. ent, Signature of New Registered Agent						
D. If amending the general partner(s), <u>enter the name and business address of each general partner being added or removed from our records</u> :									
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action						
	BSquared Investor GRAIP, LLC	nent 4808 SW 72 Miami, FL 33	Add Remove						
	JDM INNOVATORS FUND GROUP, LL	S 13155 SW 134 5 Miami FL 3318 Swite 218	Add VSE						
	· · · · · · · · · · · · · · · · · · ·		AR 30 FILEU AR 30 Remove						
<u></u>	 		Add STATE Remove						
			Add Remove						
			AddRemove						
	ed partnership or limited lia rship" status, enter change he		s amending its "limited liability						

(NOTE: If adding or removing" limited liability limited partnership" status, all general partners must sign this amendment.)

' F. If amending any other info	rmation, enter c	hange(s)	here: (Attac	h additional she	ets, if necessary.)
Effective date, if other than the date (Effective date cannot be prior to nor mo. State.)		er the dat	e this documen	nt is filed by the F	Plorida Department of
Signature(s) of a general partne	r or all general	partne	<u>rs*:</u>		
(*NOTE: Only one current general partr removing a "limited liability limited partr when adding or removing a "limited liabi	nership" election st	atement.	Chapter 620, I	S.S., requires all	nership is adding or general partners to sign
1,					
					
<i>l'</i>					
					
Signature(s) of all new or dissoci	ating general p	oartner((s), if any:		
A_{t-}					
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					<u></u>
Pilina Para	053 50				SECF TISTO
Filing Fee: Certified Copy (optional):	\$52.50 \$52.50				CRETARY ION OF C
Certificate of Status (optional):	\$8.75				30 CO
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