

L 000000004085 ✓

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FILED
11 OCT 28 AM 11:56
STATE
TALLAHASSEE, FLORIDA

B. BOSTICK
OCT 31 2011
EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: 354 South Beach Road, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Robert J. Pritchard, Jr.

Name of Person

JL Johnson Family Office, G&J Enterprises

Firm/Company

11450 S. Dixie Hwy., Suite 201

Address

Hobe Sound, FL 33455

City/State and Zip Code

rpritchard@jfohomestead.com

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

For further information concerning this matter, please call:

Robert J. Pritchard

Name of Person

at (908)

439.3130

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

FILE
11 OCT 20 AM 11:55
TALLAHASSEE, FLORIDA

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

354 South Beach Road, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 4/10/2000 and assigned
Florida document number L00000004085.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices 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)

B. If amending the registered agent and/or registered office 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: Marc R. Gaylord, Esq.

New Registered Office Address: 11700 SE Dixie Hwy.

Enter Florida street address

Hobe Sound

Florida

33455

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 608, 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.

[Signature]
If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	James L. Johnson	11450 SE Dixie Hwy. Hobe Sound, FL 33455	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGRM	Gretchen W. Johnson	11450 SE Dixie Hwy. Hobe Sound, FL 33455	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Henry Slack	Quarterwatch, LLC P.O. Box 28 Peapack, NJ 07977	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	James Kempner	Lazard Freres & Co, LLC 30 Rockefeller Plaza, 62nd Floor New York, NY 10020	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated October 12, 2011

H. L.
Signature of a member or authorized representative of a member

Henry SLACK
Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

11 OCT 28 AM 11:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA