## L01000003090

(Req	uestor's Name)	
(Add	ress)	
(Add	ress)	
(City.	/State/Zip/Phone	<del>: #)</del>
PICK-UP	☐ WAIT	MAIL
(Bus	iness Entity Nam	ne)
(Doc	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to F	 iling Officer:	

Office Use Only



400311047514

03/29/18--01018--005 \*\*25.00



1 . 1 . . . . . .

## **COVER LETTER**

SUBJECT: Jou		TMENT GROUP ited Liability Company	LLC	
The enclosed Articles of A	amendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	dence concerning this matter	to the following:		
	JOURDAN.	Name of Person  LNVESTMENT G Firm/Company  RNATH DR.  Address  L 32583  City/State and Zip Code		;-
			E. S.	ب مسدوسه مسرع
	Seekersn E-mail address: (1	ella hotmail	ification)	1
c	ncerning this matter, please ca	all:  at (850) 259  Area Code Daytin	1-4354.22	
Nam <del>e</del> of	Person	Area Code Daytim	ne Telephone Number	
Enclosed is a check for the	e 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

TO:

Registration Section
Division of Corporations

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

JOURDAN LN	VESTMENT GROUP Liability Company as it now appears on our to	LLC ecords.)
(A	Florida Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liab	ility Company were filed on <u>2/27</u> 290	$\frac{2}{2001}$ and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	ne limited liability company here:	
	_	
The new name must be distinguishable and contain the word	Is "Limited Liability Company," the designation	"LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicab	le:	
• •		
Trincipal Office address WOST BE A STREET	ADDRESS)	
	**·*··	
Enter new mailing address, if applicable:		21
(Mailing address MAY RF A POST OFFICE RC	)X)	
Manual Basico Mili Balli Odi Oli 100 De		· · · · · · · · · · · · · · · · · · ·
		7.11
R If amonding the registered agent and/or	registered office address on our re-	cords onter the name of the new
~ ~ ~	<u> </u>	्रा व्य
(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 2/27/20  Florida document number LOLOOOO 3090.  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:  A. If amending name, enter the new name of the limited liability company here:  Che new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" of the 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, registered agent and/or the new registered office address here:  Name of New Registered Agent:  New Registered Office Address:  Enter Florida street address  Enter Florida street address		
Name of New Busintaged Asset		•
Name of New Registered Agent.		
New Registered Office Address:		
	Enter Florida street a	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

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

or removed from our records.		
MGR = Manager		
AMBR = Authorized Member		

<u>Title</u>	Name	Address	Type of Action
			□ Add
			☐ Remove
		<del> </del>	
<del></del>			Add
			□ Remove
			□ Add
		<del> </del>	Remove
			Add T
			☐ Change
		··	Add
			□ Remove
			☐ Change
	<del></del>	<del> </del>	
			Remove

		<u> </u>							<del></del>	
	·							<del></del>		
	· · · · · · · · · · · · · · · · · · ·								<u>.</u>	
	<del></del>			<del></del>			<del></del>			
<del></del>						<del></del>		· · · · · · · · · · · · · · · · · · ·		
					<del></del>					
	<del></del>	<u> </u>		<del></del>				··-		
		<del></del> ·							711	
								'-	2011 HAR 29	
								-	رد. ده	1
							·	•_	<u> </u>	·
								<u> </u>		5
									~	r L
(If an effective Note: If the	ate, if other the date is listed, the date inserted in effective date of	date must be sp n this block d	ecific and co	annot be pri	icable statut	filing or more d tory filing rec	ian 90 davs afte	onal) r filing.) Pursus s date will no	ant to 605.0 ot be listed	)207 (3 d as th
he record The 90tl	specifies a d h day after t	lelayed effe he record i	ective da s filed.	te, but r	ot an effe	ective time	, at 12:01	a.m. on th	e earliei	r of:
Dated M	Jarch	26	, , 4	2012 1	3					
			sul	/						
<u>-</u>		The same of the sa								
_	(\(\sigma \(\mu\)	Mena	iture of a गेर		thorized reproduced Name of the ARDA	esentative of a	member			

Page 3 of 3

Filing Fee: \$25.00