L010000023394

(Requestor's Name)				
(Address)				
(Address)				
(City/State/Zip/Phone #)				
PICK-UP WAIT MAI	L			
(Business Entity Name)				
(Document Number)				
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2011 NOV LO PH 4: 19
SECRETARY OF STATE

C. LEWIS

NOV 1 0 2011

EXAMINER



November 8, 2011

Via FedEx

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

Re: JDM Partners, LLC - Doc# L01000022394

Name Change and Reinstatement

To Whom It May Concern:

Enclosed are the required documents for the Name Change and Reinstatement of the above referenced corporation. Also enclosed is check number 2780 in the amount of \$402.50 made payable to the Florida Department of State for the Name Change Fee (\$25.00) and Reinstatement Fee (\$377.50).

Please do not hesitate to contact me should you require any additional information or have any questions.

Cindy Barbara

Enclosure

COVER LETTER

TO:	Registration Sec Division of Cor		•	
SUBJE	ECT:	JDM F	Partners, LLC	
50101			ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
Ric			Richard L. Barbara	
			Name of Person	
		A	lvarez & Barbara, LLF	-
			Firm/Company	
2701 South Bayshore Drive, Suite 500				Suite 500
Address				
			Miami, FL 33133	
			City/State and Zip Code	
		gvalle	thegarciacompanies to be used for future annual rep	s.com
				ort nottification)
For fur	ther information co	oncerning this matter, please of	call:	
	Cin	dy Barbara	at (_305_)	263-7700
	Name of	Person	Area Code &	Daytime Telephone Number
Enclose	ed is a check for th	e following amount:		
\$25	.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is 6	should be should
	Registra Division P.O. Bo	NG ADDRESS: ation Section n of Corporations ox 6327 ssee, FL 32314	Registratio Division of Clifton Bui	Corporations

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2811 NOV 10 PM 4: 13

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JDM Partners, LLC

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

The Articles of Organization f	or this Limited Liability Company	were filed on	12/21/2011	and assigned
Florida document number	L01000022394			
This amendment is submitted	to amend the following:			
A. If amending name, enter	the new name of the limited liabi	lity company here:		
	JDM Partners of shable and end with the words "Limit	SouthFlo	rida LLC	-
The new name must be distingui "L.L.C."	shable and end with the words "Limit	ted Liability Company	y," the designation "LI	.C" or the abbreviation
Enter new principal offices a	iddress, if applicable:			anes .
(Principal office address MU.	ST BE A STREET ADDRESS)			
Enter new mailing address, i				
(Mailing address MAY BE A	<u>POST OFFICE BOX)</u>			
	ered agent and/or registered off		r records, enter th	e name of the new
registered agent and/or the n	new registered office address here	2		
N CN P '				
Name of New Regist	ered Agent:			
New Registered Offi	ce Address:	Frets	r Florida street addr	ALL V
		Enter Florida street adaress		
		City	, Florida	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.

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:

	: Manager I = Managing Membe	r			
<u>Title</u>	<u>Name</u>			Address	Type of Action
					□ n
	-		· 		Remove
					□ Damaya
		.			□ D om ove
					_
D. If ar	nending any other inf	ormation, en	ter change(s	s) here: (Attach additional sheets, if r	necessary.)
					2011 NOV 1:0 SECRETARY TALLAHASSI
Dated	November	8	, 2011		ON LO PH 4: 18 RETARY OF STATE HASSEE. FLORID
		Signature of	a member or	authorized representative of a member	
	*		Dany Typed or	Garcia Johnson printed name of signee	

Page 2 of 2

Filing Fee: \$25.00