

LO2 0000 10375

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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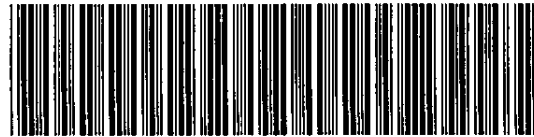
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 NOV - 6 PM 12:59

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T. CLINE
NOV - 7 2012
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jenrob Properties, L.L.C.

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:

Keith Grumer

Name of Person

Grumer & Macaluso, P.A.

Firm/Company

One E. Broward Blvd., #1501

Address

Fort Lauderdale FL 33301

City/State and Zip Code

kgrumer@grumerlaw.com

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

For further information concerning this matter, please call:

Keith Grumer

Name of Person

954 713-2700

at ()

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

2012 NOV 6 PM 12:55
SECRETARY OF STATE
TALLAHASSEE, FL 32301

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

JENROB PROPERTIES, L.L.C.

(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 04/30/2002 and assigned
Florida document number L02000010375.

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)

15645 Collins Avenue

805

N. Miami Beach FL 33160

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

15645 Collins Avenue

805

N. Miami Beach FL 33160

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:

Keith T. Grumer

New Registered Office Address:

One E. Broward Boulevard, #1501

Enter Florida street address

Fort Lauderdale

Florida 33301

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

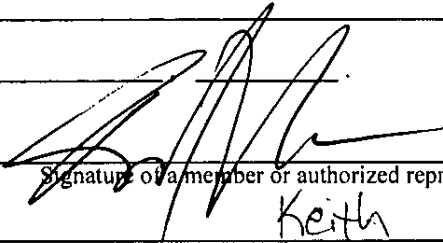
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Hospitality & Hotel Enterprises LLC	13930 North Dale Mabry Highway, Suite 1	<input type="checkbox"/> Add
		Tampa FL 33618	<input checked="" type="checkbox"/> Remove
MGRM	Robert W. Jeffrey	15645 Collins Ave., #805	<input checked="" type="checkbox"/> Add
		North Miami Beach FL 33160	<input type="checkbox"/> Remove
MGRM	Kathleen P. Jeffrey	15645 Collins Ave., #805	<input checked="" type="checkbox"/> Add
		North Miami Beach FL 33160	<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

2012 MAY - 6 PM 12:39
 SCOTT COUNTY
 TALLAHASSEE, FL 32309

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

Dated _____



Signature of a member or authorized representative of a member

Keith T. Grumer

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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