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To:

Division of Corporations

Fax Number : (850) 617-6383

From:

Account Name : CAPITOL SERVICES, INC.

Account Number : 120160000017
Phone : (855)498-5500
Fax Number : (800)432-3622

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN RJR-JAR, LLC

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Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION HAY 19 AH 10: 19

RJR-JAR, LLC	
(Pame of the Limited Limited Com (A Plorida Limite	in say as it now appears on our records.) ed Liability Company)
The Articles of Organization for this Limited Liability Compar	ny were filed on June 5, 2002 and assigned
Florida document mimber L02000013750	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited it.	ability company bere
The new name must be distinguishable and contain the words "Limited Lie	ability Company, the designation "LLC" or the abbreviation "LLC."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	y parameterior is a second of the
`	
Enter new mailing address, if applicable:	. Character and
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	ce address on our records, <u>enter the name of the new regist</u>
	*
Name of New Registered Agent:	
New Registered Office Address:	· ·
	Enter Florida street 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 fitte, name, and address of each person; being added or removed from our records:

MGR = Manager AMBR = Authorized Member 2020 HAT 19 AH 10: 19

<u> Title</u>	Name	Address	Type of Action
Member	Robert J. Reveley	994 SE Atlantic Drive	□ Add
		Lantana, FL 33462	. Remove
			🛱 Change
Member	Julie A. Reveley	994 SE Atlantic Drive	□ Add
		Lantana, FL 33462	
			∰ Change
President	Robert J. Reveley	994 SE Atlantic Drive	F Add
		Lantana, FL 33462	□Remove
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