L03000022362

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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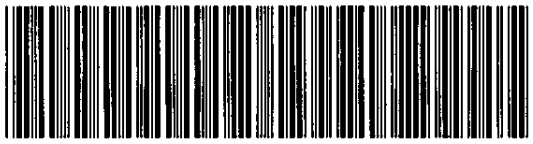

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: JLF Enterprises I, 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:

Dr. Jeffrey L. Fine, PHD
Name of Person

Firm/Company

JLF, Enterprises I, LLC
Address

6430 SW 73 Ct., Miami, Florida 33143
City/State and Zip Code

drjfine@gmail.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dr. Jeffrey L Fine ✓ at ✓ 877 ✓ 667-7607
Name of Person 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

MYERS, OLIVER & PRICE, P.C.
LAWYERS
1401 CENTRAL AVENUE, N.W.
ALBUQUERQUE, NEW MEXICO 87104

JOHN A. MYERS
KEVIN J. McCREADY
HOPE MEAD WYNN
J. MATT MYERS

CHARLES P. PRICE III, *Of Counsel*
FLOYD D. WILSON, *Of Counsel*
SCOTT OLIVER *Of Counsel*

TELEPHONE
(505)247-9080
FACSIMILE
(505)247-9109

e-mail: jmyers@moplaw.com

November 13, 2014

FEDERAL EXPRESS
PERSONAL AND CONFIDENTIAL
Ms. Tammy Hampton
Florida Department of State
Division of Corporations
2661 Executive Center Circle
Clifton Building
Tallahassee, Florida 32301

Re: JLF Enterprises I, LLC

Dear Tammy:

This office represents JLF Enterprises I, LLC, and Jeffrey Fine and Dalit Fine, its members. Pursuant to our telephone conversation of today, I enclose the following documents:

1. Two Limited Liability Company Reinstatement forms for JLF, LLC;

2. This firm's check number 17570 in the amount of $932.50 representing the reinstatement fee;

3. Cover Letter for JLF Enterprises I, LLC;

4. Two Articles of Amendment for name change to "JLF Enterprises I, LLC"; and

5. This firm's check number 17471 in the amount of $25.00 to cover the cost of the filing fee for the Articles of Amendment.

Please file the Reinstatement form and the Articles of Amendment with the Division of Corporations and return filed copies of both in the enclosed federal express envelope I have provided for you.

Thank you for taking the time to speak with me and assisting me in getting this limited liability company reinstated and name changed in such a timely fashion. It's nice to know there are people who care about their jobs and help others.

Very truly yours,

MYERS, OLIVER & PRICE

By: Karen Lee Arfman Ward
Karen Lee Arfman Ward

JAM/klaw
Enclosures
cc: Dr. Jeffrey L. Fine (email)

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TALLAHASSEE, FLORIDA

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

JLF, 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 June 16, 2003 and assigned Florida document number L03000022362.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JLF ENTERPRISES I, LLC

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)

6430 SW 73 Ct.
Miami, Florida 33143

Enter new mailing address, if applicable:
(Mailing address MAY BE A POST OFFICE BOX)

6430 SW 73 Ct.
Miami, Flordia 33143

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: Dr. Jeffrey L. Fine

New Registered Office Address: 6430 SW 73 Ct.
Enter Florida street address

Miami, **Florida** 33143
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.

Jeffrey L. Fine

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager
AMBR = Authorized Member

Title	Name	Address	Type of Action
	None		☐ Add
			☐ Remove
			☐ Add
			☐ Remove
			☐ Add
			☐ Remove
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

None

E. Effective date, if other than the date of filing: _____ (optional)
(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated November 4, 2014.

Dr. Jeffrey L. Fine

Signature of a member or authorized representative of a member

Dr. Jeffrey L. Fine

Typed or printed name of signee

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TALLAHASSEE, FLORIDA

Filing Fee: $25.00