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DATE: 10-09-2012

NAME: HARBOR JACKSONVILLE MANAGEMENT LLC

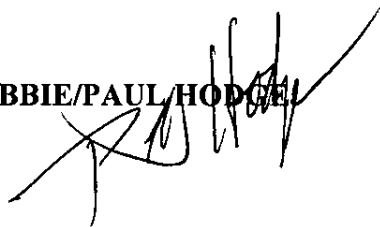
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: HARBOR JACKSONVILLE MANAGEMENT, 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:

THOMAS MITCHELL

Name of Person

HARBOR JACKSONVILLE MANAGEMENT, LLC

Firm/Company

1446 HIGHWAY A1A

Address

VERO BEACH, FL 32963

City/State and Zip Code

tmitchell@hramline.net

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

For further information concerning this matter, please call:

THOMAS MITCHELL

Name of Person

at (772) 492-5002

Area Code & Daytime Telephone Number

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Enclosed is a check for the following amount:



\$25.00 Filing Fee



\$30.00 Filing Fee &
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\$60.00 Filing Fee,
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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

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

HARBOR JACKSONVILLE MANAGEMENT, 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 6/24/2003 and assigned
Florida document number L03000022921.

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)

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, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: NATIONAL CORPORATE RESEARCH, LTD., INC.

New Registered Office Address: 155 Office Plaza Drive
Enter Florida street address

Tallahassee, Florida 32301
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.

Colleen McMahon, Asst. Sec.
If Changing Registered Agent, Signature of New Registered Agent

