Jun -

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| A. LUNT |
| MAR 26 2010 |
| EXAMINER |

100173088171

03/25/10--01008--012 **30.00

Office Use Only

COVER LETTER

| Division of | a Section, Corporations | | | | | |
|--------------------------|--------------------------------------|--|--|-----|--|--|
| SUBJECT: | Jesse J | . Cooke L.L.C. | | | | |
| | Name of Limi | ted Liability Company | | | | |
| The enclosed Articles | of Amendment and fee(s) are sul | omitted for filing. | | | | |
| Please return all corre | espondence concerning this matter | to the following: | | | | |
| | | Jesse J. Cooke | | | | |
| | | Name of Person | 2010 HAR SECRE D TALLAHA | | | |
| | J | Jesse J. Cooke L.L.C. | | | | |
| | | Firm/Company | R 25 ETARY HASS | | | |
| | , | 050 0 144 Jamina Assa | [T] | | | |
| | | 252 S.W. Janice Ave. Address | AM II: 51 OF STATE E. FLORIC | C | | |
| | | | ORIE 5 | | | |
| | P | ort St. Lucie, Fl 34953 | ucie, Fl 34953 | | | |
| | | City/State and Zip Code | | | | |
| | E-mail address: (| to be used for future annual report notifica | tion) | | | |
| For further information | on concerning this matter, please of | call: | | | | |
| | Jesse J Cooke | at (772) 20 | 01 5751 | | | |
| Nan | ne of Person | Area Code & Daytime T | elephone Number | | | |
| Enclosed is a check for | or the following amount: | | | | | |
| | \$30.00 Filing Fee & | \$55.00 Filing Fee & | \$60.00 Filing Fee, | | | |
| _ | Certificate of Status | Certified Copy (additional copy is enclosed) | Certificate of Status & Certified Copy | | | |
| | | (| (additional copy is enclose | ed) | | |
| RAI A | AILING ADDRESS: | STDEET/CAUDIEU | ADDDFSS. | | | |
| Registration Section | | STREET/COURIER ADDRESS: Registration Section | | | | |
| Division of Corporations | | Division of Corporations | | | | |

P.O. Box 6327
Tallahassee, FL 32314

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| | esse J. Coc | | , | |
|--|--------------------------------------|--|------------------------|--------------------------|
| (<u>Name of the Limited L</u> (A F | iability Compan lorida Limited Li | y <mark>as it now appea</mark> ability Company) | rs on our records.) | |
| The Articles of Organization for this Limited Liab | oility Company v | were filed on | 11/24/2003 | and assigned |
| Florida document numberL03000470 | 005 | | | |
| This amendment is submitted to amend the follow | ving: | | | • |
| A. If amending name, enter the new name of t | he limited liabil | ity company her | <u>:e</u> : | |
| | same | | 5 | 20 |
| The new name must be distinguishable and end with "L.L.C." | the words "Limite | ed Liability Compa | | LCC" of the abbreviation |
| Enter new principal offices address, if applicat | ołe: | same | | (A) (S) [] |
| (Principal office address MUST BE A STREET | ADDRESS) | | <u> </u> | |
| | | | £- | |
| | | | | 1: 5g |
| Enter new mailing address, if applicable: | same | ן | > - | |
| (Mailing address MAY BE A POST OFFICE B | <u>0X)</u> | | | |
| | | | | |
| B. If amending the registered agent and/or registered agent and/or the new registered office | | | our records, enter | the name of the nev |
| Name of New Registered Agent: | same | | | |
| New Registered Office Address: | | | | |
| | | En | ter Florida street add | tress |
| | | | , 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 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:

MGR = Manager

MGRM = Managing Member **Title** <u>Address</u> Type of Action <u>Name</u> MGRM Dax Becker 741 S.E. Polynesian Ave. Port St. Lucie, Fl 34983 ✓ Add Remove ☐ Add Remove ☐ Add Remove Add D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) March 18 2010 Dated ____ Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00