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(Re	equestor's Name)	
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(Ci	ity/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	usiness Entity Nam	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status

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OCT -7 2011

EXAMINER

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SECRETARY OF STATE

COVER LETTER

то:	Registration Sect Division of Corpo						
SUBJECT: JVI - Appraisal Division L.L.C.							
		Name of Limi	ted Liability Company				
The end	closed Articles of Ar	mendment and fee(s) are sub	omitted for filing.				
Please	return all correspond	lence concerning this matter	to the following:				
			Ron L. Nation				
			Name of Person				
JVI - Appraisal Division L.L.C.							
Firm/Company							
		701 Inter	rnational Parkway, Suite 2	00			
Address							
		1	Lake Mary, Fl 32746				
City/State and Zip Code							
		rna	ation@jvisolutions.com	(faction)			
For furt	her information con	cerning this matter, please c		neation)			
	Ron	L. Nation	at (_407_)	531-5333			
	Name of P	erson		ne Telephone Number			
Enclose	ed is a check for the	following amount:					
√ \$25.	00 Filing Fee [\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclose	\$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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JVI - (<u>Name of the Limited I</u> (A	· Appraisal [Liability Compar Florida Limited L	Division L.L.C. y as it now appears on our place is a significant of the company	records.)			
The Articles of Organization for this Limited Lia Florida document number L0400002		were filed onJanuary	y 2, 2004	and as	signed	
This amendment is submitted to amend the follow	wing:					
A. If amending name, enter the new name of	the limited liab	ility company here:				
The new name must be distinguishable and end with "L.L.C."	the words "Limit	ted Liability Company," the d	esignation '	"LLC" or the	abbreviation	
Enter new principal offices address, if applicable:		JVI - Appraisal Division L.L.C.				
(Principal office address MUST BE A STREET ADDRESS)		701 International Parkway, Suite 200				
		Lake Mary, Fl 32746				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		JVI - Appraisal Division L.L.C. 701 International Parkway, Suite 200 Lake Mary, FI 32746				
B. If amending the registered agent and/or registered agent and/or the new registered offi		ice address on our recor	ds, <u>enter</u>	the name	of the new	
Name of New Registered Agent: Ron L. Nation		on		AEE T		
New Registered Office Address:	701 International Parkway, Suite 200					
	ake Mary,	Florida _	平 32至	6 M		
	City	•	Saip God			
New Registered Agent's Signature, if changing Re	egistered Agent:			DM LA		

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 am and address 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:

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MGR = Manager

MGRM = Managing Member <u>Title</u> **Type of Action** Name 1 **Address** MGRM Angela Tavarez 701 International Parkway, Suite 200 ☐ Add Lake Mary, Fl 32746 Angela Tavarez MGR 701 International Parkway, Suite 200 ☐ Add Lake Mary, Fl 32746 ✓ Remove Add Remove Remove □Add _ Remove Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) October 3rd 2011 Signature of a member of authorized representative of a member Ron L. Nation Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00