# 3001214°

| (Red                      | juestor's Name)  |           |
|---------------------------|------------------|-----------|
| (Add                      | Iress)           |           |
| (Ada                      | Iress)           |           |
| (City                     | /State/Zip/Phone | ) #)      |
|                           |                  | <u></u>   |
| ☐ PICK-UP                 | ☐ WAIT           | MAIL .    |
| (Bus                      | iness Entity Nam | ne)       |
| (Doc                      | ument Number)    |           |
| (200                      | ,                |           |
| Certified Copies          | Certificates     | of Status |
| Special Instructions to F | filing Officer:  |           |
|                           |                  |           |
| ,                         |                  |           |
|                           |                  |           |
|                           |                  |           |
|                           |                  |           |



100172024241

03/17/10--01014--018 \*\*35.00

Office Use Only

BAN S & SO10 S. HAWKES

**S. HAWKES** 

**EXAMINER** 



March 18, 2010

JEREMY DEAN 5075 HAMILTON BRIDGE ROAD PACE, FL 32571

SUBJECT: JEREMY DEAN LLC Ref. Number: L05000012148

We have received your document for JEREMY DEAN LLC and your check(s) totaling \$35.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6955.

Letter Number: 910A00006771

Suzanne Hawkes Regulatory Specialist II

D' ' ' . . (C. . . . . . . . . D. O. DOY 6007 TO 11 1 TO 11 00014

# **COVER LETTER**

| Division of Corporations     |  |   |   |  |
|------------------------------|--|---|---|--|
| SUBJECT:                     | JEREM  | IY DEAN, LLC  |   |  |
| <del>,</del>                 | Name of Limi   | ited Liability Company  |   |  |
|                              |  |   |   |  |
| The enclosed Articles of A   | mendment and fee(s) are sub  | omitted for filing.   |   |  |
| Please return all correspond | dence concerning this matter   | to the following:   |   |  |
| 1                            |  |   |   |  |
|                              |  | JEREMY DEAN   |   |  |
|                              |  | Name of Person  |   |  |
|                              |  |   |   |  |
|                              |  | IEREMY DEAN, LLC  | ······································  |  |
|                              |  | Firm/Company  |   |  |
|                              | 5075 H   | IAMILTON BRIDGE ROAD  |   |  |
|                              |  | Address   |   |  |
|                              |  |   |   |  |
|                              | PACE, FL 32571   |   |   |  |
| City/State and Zip Code      |  |   |   |  |
|                              | equityaccounting@bellsouth.net  E-mail address: (to be used for future annual report notification) |   |   |  |
|                              | `  | •   |   |  |
| For further information con  | cerning this matter, please c  | all:  |   |  |
| IEDE                         | EMY DEAN   | . 950   | 91-3807   |  |
| Name of F                    |  | at ( 850 ) 7  Area Code & Daytime 7                               |   |  |
|                              |  | •   | <b>L</b>  |  |
| Enclosed is a check for the  | following amount:  |   |   |  |
|                              | -<br>-   | These on Eiling For 9.  |   |  |
| \$25.00 Filing Fee           | \$30.00 Filing Fee & Certificate of Status   | \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) | S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed) |  |
|                              |  |   |   |  |

### MAILING ADDRESS:

Registration Section

TO:

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

|   | JEREMY D          | EAN, LLC                     |                             |                         |  |
|---|-------------------|------------------------------|-----------------------------|-------------------------|--|
| ( <u>Name of the Limited</u><br>(A  | Liability Compa   | ny as it now appear          | s on our records.           |                         |  |
| (A  | riorida Limited i | Liability Company)           | ··                          | 6                       |  |
| The Articles of Organization for this Limited Li Florida document numberL05000012       | ability Company   | were filed onFl              | EBRUARY 7, 200              | 5 and assigned          |  |
| Florida document number L05000012   | 148               |                              |                             |                         |  |
|   | ·                 |                              |                             | 3555<br><b>64</b>       |  |
| This amendment is submitted to amend the follo  | wing:             |                              |                             | K. Co. S.               |  |
| A. If amending name, enter the new name of  | the limited ligh  | ility company her            | Δ•                          | Er.                     |  |
| I amenang name, once the new name of  | the mineq ma      | mey company ner              | <u>c</u> .                  | <b>3</b> /-             |  |
|   |                   |                              |                             |                         |  |
| The new name must be distinguishable and end with "L.L.C."                              | the words "Lim    | ited Liability Compa         | ny," the designation "L     | LC" or the abbreviation |  |
| Enter new principal offices address, if applicable:                                     |                   | 5075 HAMILTON BRIDGE ROAD    |                             |                         |  |
| (Principal office address MUST BE A STREE)  | T ADDRESS)        | PACE, FL 32571               |                             |                         |  |
| Enter new mailing address, if applicable:   |                   | 5075 HAMILT                  | ON BRIDGE RO                | AD                      |  |
| (Mailing address MAY BE A POST OFFICE BOX)  |                   | PACE, FL 32571               |                             |                         |  |
|   |                   |                              | <u> </u>                    |                         |  |
|   |                   |                              |                             | <del></del>             |  |
| B. If amending the registered agent and/oregistered agent and/or the new registered off |                   |                              | our records, <u>enter t</u> | he name of the new      |  |
| Name of New Registered Agent:   |                   |                              |                             |                         |  |
| New Registered Office Address:  | 5075 HAMI         | LTON BRIDGE                  |                             |                         |  |
|   |                   | Enter Florida street address |                             | ress                    |  |
|   |                   | PACE                         | , Florida                   | 32571                   |  |
|   |                   | 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

1.1

| <u>Title</u> | Name                          | <u>Address</u>  | Type of Action |
|--------------|-------------------------------|---|----------------|
| MGRM         | JOSH REYNOLDS                 | 1144 E. JOHNSON AVENUE<br>PENSACOLA, FL 32514                 | Add<br>Remove  |
|              |                               |   | And Remove     |
|              |                               | .7  | Add Remove     |
|              |                               |   | Add Remove     |
|              |                               |   |                |
|              |                               |   | Remove         |
| D. 16        | ling and other information on | ter change(s) here: (Attach additional sheets, if necessary.) | Add<br>Remove  |
| D. II amend  | ing any other information, en | er enauge(s) nere: (Auach auamonai sneeis, y necessary.)      |                |
|              |                               |   |                |
| _            |                               |   |                |
| Dated        | MAY 13                        |   |                |
|              | Signature o                   | f a member or authorized representative of a member           |                |
|              | \                             | JEREMY DEAN  Typed or printed name of signee                  |                |

Page 2 of 2

Filing Fee: \$25.00