Fm:Swart Baumruk & Company - fax 407-847-6641 Tg:Articles of Amendment faxed to Sunbiz 10:20 06/29/11GMT-05 Pg 01-03

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Florida Department of State

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From:

Account Name : SWART BAUMRUK & COMPANY, LLP

Account Number : 120000000291 : (407)847-7466 Phone Fax Number : (608)399-1028

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Fm:Swart Baumruk & Company - fax 407-847-6641 To:Articles of Amendment faxed to Sunbiz 10:20 06/29/11GMT-05 Pg 02-03 (((H1700017/0511 3)))

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

11 JUN 29 AM 9: 26

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JEMAD I	<u>NVESTMENTS, L</u>	LC	
(<u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appo Limited Liability Company	<u>mrs on our records.</u>)	
The Articles of Organization for this Limited Liability (Company were filed on	February 7, 2005	and assigned
Florida document number LO5000012603	•		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	ited liability company h	ere:	
The new name must be distinguishable and end with the wo "L.L.C."	rds "Limited Liability Com	pany," the designation "Ll	.C" or the abbreviation
Enter new principal offices address, if applicable:			<u> </u>
(Principal office address MUST BE A STREET ADDI	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		our records, enter th	e name of the new
Name of New Registered Agent:			
New Registered Office Address.			<u></u>
	Enter Florida street address, Florida		
	Ciţy		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

Page 1 of 2

MGR = Manager

MGRM = Managing Member

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:

Teal.	Mana	A. A. J	The second section
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Coilin M. McManus	52 Riley Road #207 Celebration FL 34747	7 Add Remove
<u>MGRM</u>	Aidan McGuinness	.52 Riley Road #207 Celebration FL 34747 reaffirmation of member sta	
MGRM	Eileen McGuinness	52 Riley Road #207 Celebration, FL 34747 reaffirmation of member sta	
		*	P 10
			<u> </u>
			Add
D. If amend	ling any other information	, enter change(s) here: (Attach additional sheets, i	FILE II JUN 29 ALLAHASSEE
Dated	June 28		AH 9: 26 F STATE FLORIBA
	Signatur	e of a member or authorized representative of a membe	:r
	A	idan McGuinness, Managing Member	
		Typed or printed name of signee	

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Page 2 of 2 Filing Fee: \$25.00