

Division of Corporations Public Access System

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Division of Corporations

Fax Number : (850)617-6383

Account Name : GASSMAN & ASSOCIATES, P.A. .

Account Number : 075350000514 Phone : (727)442-1200

Fax Number r (727)443-5829

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

JAY-B, L.L.C.

Certificate of Status	0
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Page Count	01
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAY-B, L.L.C.			
(<u>Name of the Lâmited Liabili</u> (A Florida	ty Compar Limited L	ny as it now appears on our record liability Company)	<u>i.</u>)
The Articles of Organization for this Limited Liability	Company	were filed on September 13, 200	5 and assigned
Florida document number L05000090040			
			•
This amendment is submitted to amend the following:			,
A. If amending name, enter the new name of the lin	mited liab	ility company here:	
<u> </u>			
The new name must be distinguishable and end with the w	ords "Limi	ted Liability Company," the designat	ion "LLC" or the abbreviation
"L.L.C."			TALL SE
Enter new principal offices address, if applicable:		8839 Bryan Dairy Road	
(Principal office address MUST BE A STREET ADDRESS)	RESS)	Suite 215	
		Largo, Florida 33777	
			लिली
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			9 联票
			5
			·
B. If amending the registered agent and/or registered agent and/or the new registered office ad-			iter the name of the new
registered agent and/or the new registered office ad-	ui ess nei	<u>s</u> :	
Name of New Registered Agent:			
New Registered Office Address: 8839	9 Bryan D	airy Road, Suite 215	
		(Enter Florida stre	et address)
Larg	0		la <u>33777 </u>
		(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;

MGRM = [M]	Managing Member	•	
<u>Title</u>	Name	<u>Address</u>	Type of Action
·	·		PT D
<u></u>			
·			
	· · · · · · · · · · · · · · · · · · ·		
			- D
D. If amen		n, enter change(s) here: (Auach additional shee	0CT -2 M 9
Dated Octo	ber 2		.50
		ure of a member or authorized representative of a me	ember
	Alan S. G	assman, Authorized Representative	

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Filing Fee: \$25.00