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Division of Corporations



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From:

Account Name : TRIPP SCOTT, P.A. Account Number : 075350000065 Phone : (954)525-7500 Fax Number : (954)761-8475

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address: MMM@TRIPPSCOTT.COM

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

H22000222308

-	J PARK DR, LLC	
(<u>Name of the Limited Liability Com</u> (A Florida Limite	pany as It now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compare Florida document number <u>L06000025905</u>	ny were filed on March 10, 2006	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lin	ability company here:	
EJIO ETTEVEN BEYOND, LLC		
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		. <u>.</u>
		<u> </u>
	-	
Enter now mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
Induing dearess mill be 112 QQA Q2 11CD 2000		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	e address on our records, <u>enter the na</u>	me of the new registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	<u> </u>
	Enter Piorida street daaress	22 5
	, Florida _	7:- (-7:3
	City	. 20 000
New Registered Agent's Signature, if changing Registered Ager	ıt:	· · · · · · · · · · · · · · · · · · ·
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and comple accept the obligations of my position as registered agent a being filed to merely reflect a change in the registered officompany has been notified in writing of this change.	tte performance of my duties, and I an is provided for in Chapter 605, F.S. O	n familiar with and r, if this document is
If C	hanging Registered Agent, Signature of New F	Registered Agent

H22000222308

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	Name	Address	Type of Action
_			
			□Remove
			Change
			DAdd
			□Remove
	<u> </u>		
			□Remove
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			ClAdd
			□Remove
			☐ Change

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fective date, if other than	the date of filing:			_ (optional)	
n effective date is listed, the date ite: If the date inserted in the	i miliu ne mecine una cuanc	X DE DENOTE UD OBLE DI U	שי על נושום שוטור זו אלוווו	ays after filing.) Pursuant	to 605.020
cument's effective date on the	ie Department of State's	records.	ory mang requireme	ing, this date with hor	
ecord specifies a delayed effi	ctive date, but not an ef	fective time, at 12:	01 a.m. on the earlie	er of: (b) The 90th de	y after th
is filed.					
	201	22			
JUNE 28		_ ·			
ted	,	1			
ted	Signature of a member	Damyof Daws,			

Filing Fee: \$25.00