# L06000031807

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SECRETARY OF STATE
TALLAHASSEE FLORIDA

T. HAMPTON

MAY 23 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Sec Division of Corp	ction porations			
suвјест: Jax Ada	ms Management, L (Name of Lim	LC iited Liability Company)		
The enclosed Articles of A	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspon	idence concerning this matter	to the following:		
	Shannan L. Mullenix			
(Name of Person)				
Brennan, Manna & Diamond, LLC Law Firm				
		(Firm/Company)		
	75 East Market Street			
		(Address)		
	Akron, Ohio 44308			
		(City/State and Zip Code)		
For further information co	ncerning this matter, please c	all:		
Shannan L. Mullenix		at ( 330 ) 253-5060 ext. 1	59	
(Name of	Person)	(Area Code & Daytime T		
Enclosed is a check for the	e following amount:			
☑ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
MAILIN	NG ADDRESS:	STREET/COURIER	ADDRESS:	

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

# BRENNAN, MANNA & DIAMOND

ATTORNEYS & COUNSELORS AT LAW

Shannan L. Mullenix

Phone: (330) 253 - 5060 ext. 159

Fax: (330) 253 – 1977 slmullenix@bmdllc.com

#### VIA FEDEX OVER NIGHT DELIVERY

Registration Section Division of Corporation

May 21, 2008

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

RE: Jax Adams Management, ELC

Dear/Sir-or-Madam

Enclosed please find the Articles of Amendmentsfor the above-referenced entity, along with a check in the amount of \$2500 forsthe fitting size. Please file the same and return any receipts and order tificates to fine.

Thank you for your time and attention to this matter—Please feel-free to contact me with any questions you may have.

Shannan Ex-Mullenix grant and attention to this matter—Please feel-free to contact me with any questions you may have.

### ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OB HAY 22 PM 2: 59
SECRETARY OF STATE
AND AHASSEE, FLORIDA

Jax Adams Management, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company	were filed on 03/23/2006	and assigned
Florida document number L06000031807		
This amendment is submitted to amend the following:		
<ul> <li>A. If amending name, enter the new name of the limited liab</li> <li>Jax West Monroe Management, LLC</li> </ul>	ility company here:	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the des	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	76 South Laura Street	
(Principal office address MUST BE A STREET ADDRESS)	Suite 2110	
	Jacksonville, FL 32202	
Enter new mailing address, if applicable:	76 South Laura Street	
(Mailing address MAY BE A POST OFFICE BOX)	Suite 2110	
	Jacksonville, FL 32202	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here.  Name of New Registered Agent:		ls, enter the name of the new
New Registered Office Address:		
	(Enter Florida	a street address)
	, F	Florida
	(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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

1

MGR = Ma MGRM = N	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necessa	ry.)
   	44		FILED  08 HAY 22 PM 2: 55  SEGRETARY OF STATE TALLAHASSEE FLORIDA
Dated	Mry 21, 200	r or authorized representative of a member	
	Lee S. Walko	t of authorized representative of a member	
		or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00