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FILED 113 JUN 27 PHIZ: 41 SECRETARY OF STATE

JUN 28 2013 J. BRYAN

## **COVER LETTER**

TO:

Registration Section Division of Corporations

SURTECT

Progress Home Buyers, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Adam Rigel

Name of Person

Progress Home Buyers, LLC

Firm/Company

2406 University Blvd West

Address

Jacksonville, FL 32217

City/State and Zip Code

adam@jacksonvillewealthbuilders.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Adam Rigel

Name of Person

Area Code & Daytime Telephone Number

Enclosed is a check for the 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)

**MAILING ADDRESS:** 

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

Progress Home Buyers,			
( <u>Name of the Limited</u> (A	<u>Liability Com</u> Florida Limite	pany as it now appears on our red d Liability Company)	cords.)
The Articles of Organization for this Limited List Florida document number 270141157	ability Compa	any were filed on 04/05/2006	and assigned
This amendment is submitted to amend the follo	wing:		
A. If amending name, enter the new name of	the limited l	iability company here:	
JWB Real Estate Capital, LLC			
The new name must be distinguishable and end with "L.L.C."	h the words "L	imited Liability Company," the des	ignation "LLC" or the abbreviation
Enter new principal offices address, if applica	able:	N/A	CC U
(Principal office address MUST BE A STREE	T ADDRESS	)	SST P
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>BOX)</u>	N/A	PH 12: 4
B. If amending the registered agent and/or registered agent and/or the new registered of Mame of New Registered Agent:  New Registered Office Address:		here: - Enter 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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member **Type of Action** <u>Name</u> <u>Address</u> <u>Title</u> N/A Remove Remove Remove Add Remove Remove

If amending any other i	information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
June 24	, 2013
	Signature of a member or authorized representative of a member
	Adam Right Typed or printed name of signee
	Dage 2 of 2

Page 3 of 3

Filing Fee: \$25.00

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2013 JUN 27 PH 12: 41
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