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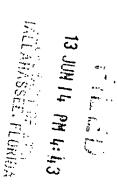
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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	
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Office Use Only



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O. BUTLER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT. J

J M ENTERPRISES A 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:

JAY BASS

Name of Person

J M ENTERPRISES A FLORIDA LLC

Firm/Company

1575 SW 115 AVENUE

Address

DAVIE, FL 33325

City/State and Zip Code

BASSJAY44@YAHOO.COM

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

For further information concerning this matter, please call:

JAY BASS

*..,*954、9146435

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

J M ENTERPRISES A LLC		
(Name of the Limited Lia	bility Company as it now appears on our recorda Limited Liability Company)	rds.)
(A F10)	nda Limited Liability Company)	*
	05/20/2013	<u> </u>
The Articles of Organization for this Limited Liabil	ity Company were filed on US/29/2013	and-assigned
Florida document number L06000051408		
Tiorida document number	*	
		EDES CONTROL
This amendment is submitted to amend the following		
· · · · · · · · · · · · · · · · · · ·	'5'	
A. If amending name, enter the new name of the	limited lighility company here:	[6] 년 경기 년
. If amending name, enter the new name of the	innece manney company neic.	ς, ω
		•
The new name must be distinguishable and end with the	words "Limited Liability Company," the design	nation "LLC" or the abbreviation
"L.L.C."		
		•
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET A	DDRESS)	
11 INTERNATIONAL WAR COST DE 71 OTTENT 71		· · · · · · · · · · · · · · · · · · ·
	•	
77		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	X) .	
B. If amending the registered agent and/or r	egistered office address on our records,	enter the name of the new
registered agent and/or the new registered office	address here:	
Name of New Registered Agent:	,	·
New Registered Office Address:		
	Enter Florida st	reet address
•		
****		rida
	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>:

MGR = Manager MGRM = Managing Member

Title `	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	JAY BASS	5941 SW 36 COURT	Add
		DAVIE, FL 33314	Remove
			
		-	Add
			Remove
			— ,
			Add Remove
		ر العلام العلام المراجع	PH (
		ू के किया है। सर्वे	Add
			Remove
		·	
	***************************************		Add
			Remove
			_
			Add
•		<u> </u>	Remove

amending any other information, ent	ter change(s) here: (Attach additional sheets, if necessary.)
	Manager to the state of the sta
	100 - Will 18-7, 5-7 (2-7)
MAY 29	2013
ND	•
Signature of	a member or authorized representative of a member
MARITZA NIEVES	
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

13 JUN 14 PM 4: 43