

02/01/2008 11:50 9547315413

Division of Corporations

SUTTON

L06000070063

Florida Department of State
Division of Corporations
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To:

Division of Corporations
Fax Number : (850) 617-6383

From:

Account Name : AROUND THE CLOCK CONSULTING, INC.
Account Number : I20070000150
Phone : (954) 731-9737
Fax Number : (954) 731-5413

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

JPS INVESTMENT GROUP, LLC

| | |
|-----------------------|---------|
| Certificate of Status | 0 |
| Certified Copy | 0 |
| Page Count | 01 |
| Estimated Charge | \$25.00 |

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DIVISION OF CORPORATIONS
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PAGE 02/05

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SUTTON
Florida Dept of State



January 31, 2008

FLORIDA DEPARTMENT OF STATE
Division of Corporations

JPS INVESTMENT GROUP, LLC
3511 WEST COMMERCIAL BLVD SUITE 307
FORT LAUDERDALE, FL 33309

SUBJECT: JPS INVESTMENT GROUP, LLC
REF: L06000070063

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet. We have received your electronically transmitted document. However, the document was submitted under the wrong electronic filing type and cannot be processed by this office.

To proceed, you must abandon this filing and resubmit your filing under the appropriate electronic filing type.

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY.

Because articles of correction must be submitted within 30 business days of the filed date, the enclosed document cannot be filed and is being returned to you.

If you have any further questions concerning your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

FAX Aud. #: H08000025637
Letter Number: 508A00006607

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TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JPS INVESTMENTS
(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:

LAMARRIS Cooper
(Name of Person)

Around The Clock Consulting, INC
(Firm/Company)

PO Box 590337
(Address)

Ft. Lauderdale FL 33359
(City/State and Zip Code)

For further information concerning this matter, please call:

LAMARRIS Cooper at (954) 731-9737
(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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
08 JAN 31 AM 8:43

JPS Investment, 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 6/30/06 and assigned
Florida document number LO6000070063.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

B. If amending the registered agent and/or registered 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 street address)

_____, 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 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:

MGR = Manager
MGRM = Managing Member

| <u>Title</u> | <u>Name</u> | <u>Address</u> | <u>Type of Action</u> |
|--------------|-------------|----------------|---------------------------------|
| | | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
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| | | | |

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Delete Address 3511 W Commercial Blvd #307

Ft. Lauderdale 71 33309

Add

3511 W Commercial Blvd # 402

Ft. Lauderdale 71 33309

Dated January 31, 2008

Signature of a member or authorized representative of a member

James C. Howard

Typed or printed name of signee

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