

**L06000088789**

Division Nov. 17. 2017 4:42PM

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Florida Department of State  
Division of Corporations  
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To:

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

From:

Account Name : FRAZIER & FRAZIER, ATTORNEYS AT LAW, P.A.  
Account Number : I20090000113  
Phone : (904) 353-5616  
Fax Number : (904) 353-5619

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

Email Address: dgrj56@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
CHJ FAMILY PROPERTIES, LLC

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

2017 NOV 17 PM 4:43

FILED  
17 NOV 17 AM 8:08  
TALLAHASSEE, FLORIDA

J. LEGGETT  
NOV 20 2017

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

CHJ Family Properties, 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 9/11/2006 and assigned Florida document number L06000088783.

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 contain the words "Limited Liability 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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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

City, Florida

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 605, 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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jan Marcia Jones	75661 Clyde Higginbotham Road	<input checked="" type="checkbox"/> Add
		Yulee, Florida 32097	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	John C. Jones	P.O. Box 586	<input checked="" type="checkbox"/> Add
		Yulee, Florida 32041	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Terri L. Johnson	86077 Macaw Road	<input checked="" type="checkbox"/> Add
		Yulee, Florida 32097	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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

ALL INFORMATION CONTAINED  
HEREIN IS UNCLASSIFIED

FLORIDA

17 NOV 17 AM 5:08

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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)  
(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)  
Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

(b) The 90th day after the record is filed.

Dated November 17, 2017

David Charles  
Signature of a member or authorized representative of the contractor

Signature of a member or authorized representative of a member

David C. Jones

Typed or printed name of signatory