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AND ANALYSIS F. FLORIDA

FEB 1 C 2015

T. HAMPTON

COVER LETTER

TO: Registration Sec Division of Cor			,
SUBJECT:	as R Poloco Name of Lim	ited Liability Company	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	Sinda W	Name of Person	
		Firm/Company	
	P.O Box 3	Address	
	Jocksonie lindourdon	Oc. FL 32203 City/State and Zip Code	y. Com
	E-mail address: (1	to be used for future annual report notifi	cation)
For further information co	oncerning this matter, please ca	all:	
Sinda W Name of	atlains	at (904) 354-3 ^r Area Code Daytime	Telephone Number
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)

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

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: James R Poles 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:
Sinda Watlains Name of Person
Firm/Company
P.O Box 2348 Address
Jochsonilla, FL 32203 City/State and Zip Code Lindan a mainmetal explina Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Sinda Wathains at (904) 354-3708 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$\Bigcu

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**

la mes P. Pot	ea. LLC				
(Name of the Lin	oited Liability Company as it (A Florida Limited Liability	t now appears on our y Company)	r records.)		
The Articles of Organization for this Limited	Liability Company were	filed on 9/28	12006	_ and assi	gned
Florida document number <u>L06000</u>					
This amendment is submitted to amend the fo	llowing:				
A. If amending name, enter the new name	of the limited liability co	ompany here:			
					
The new name must be distinguishable and end with the	e words "Limited Liability Co	ompany," the designat	ion "LLC" or the ho	11	L.C."
Enter new principal offices address, if appl	icable:		<u> </u>	28	3 [
(Principal office address MUST BE A STRE	ET ADDRESS)		523	ို့ ယ်	The state of the s
					3 1 1
			F1.0	11.5 12.	U
Enter new mailing address, if applicable:				T 55	_
(Mailing address MAY BE A POST OFFICE	<u> </u>			· · · · · · · · · · · · · · · · · · ·	
B. If amending the registered agent and	Non morintanad office o	مراجع المحادث			C 4L a manus
B. If amending the registered agent and registered agent and/or the new registered of		aaress on our r	ecords, <u>enter the</u>	name o	<u>I ine new</u>
	0.				
Name of New Registered Agent:	ainda (<u>nialtol</u>	<u> </u>		
New Registered Office Address:	1352 W. B	eaver.	Learth		
		Enter Florida street	address		
	Jockson	ملالىي	_, Florida <u>3 </u>	190d	
N P to 14 A G	Cit	ty	2	Cip Code	
New Registered Agent's Signature, if changing					
I hereby accept the appointment as register	ed agent and agree to a	ct in this canacit	v I further naree	to comple	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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

James P. lot	u, LLC				
(Name of the Lift)	ited Liability Company as (A Florida Limited Liabili	it now appears on or ty Company)	<u>ir records.</u>)		
The Articles of Organization for this Limited L		filed on 9/2	8/2006	and assig	gned
Florida document number <u>L06000</u>	<u>195391.</u>				
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name of	of the limited liability of	company here:			
The new name must be distinguishable and end with the	words "Limited Lightlity C	omnany " the designa	tion "LLC" or the	Meviation "L.	L.C."
<u>-</u>	·			CS FF	
Enter new principal offices address, if applie				-m 00	-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1-1
(Principal office address MUST BE A STREE	ET ADDRESS)		_	$\frac{1}{2}$ $\frac{1}{2}$ $\frac{1}{2}$	3 4 4
				HO P	
Enter new mailing address, if applicable:				2: 15 TATE	
(Mailing address MAY BE A POST OFFICE	BOX)			D	
					
B. If amending the registered agent and	or registered office	address on our	records, enter t	he name of	f the nev
registered agent and/or the new registered o					
Name of New Registered Agent:	Linda 1	isetoli	<u>~</u>		
New Registered Office Address:	1352 W. P.	Seaver	Learth		
		Enter Florida stree	et address		
	Jockson	ملالي	, Florida <u>_</u>	35909	
N	U	lity		Zip Code	
New Registered Agent's Signature, if changing	-				
I hereby accept the appointment as registere	d agent and agree to a	act in this capaci	tv. I further agre	e to comply	with the

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 M	the Managers or Authorized Member Member being added or removed from	on our records, <u>enter the title, name, and address of eac</u> <u>our records</u> :	h Manager or
MGR = Ma	nnager athorized Member		
<u>Title</u>	<u>Name</u>	Address Type	of Action
MGRM	WAINRIGHT, TAMMYL	7580 Danfore Boulevard DA Jacksonielle, Fl 32217 KR	ıdd
		Jacksonielle, Fl 32217 Ja	.emove
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he effective date must be specific, ca	annot be prior to date of receipt or filed date and cannot be	(optional) e more than 90 days after
The effective date must be specific, can the date this document is filed by the	annot be prior to date of receipt or filed date and cannot be Florida Department of State)	(optional) e more than 90 days after
Effective date, if other than the effective date must be specific, as the date this document is filed by the Dated	annot be prior to date of receipt or filed date and cannot be Florida Department of State)	e more than 90 days after

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