# 15600103077

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SECRETARY OF STATE
ALL AHASSEE, FLORIDA

## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: JNP SENIOR CAPE 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:
ISABEL I Jurado (Name of Person)
JNP SENIOR CARE, ULC (Firm/Company)
5449 S. Semoran Blud, ste 226 (Address)
ORLANDO, FL 32822 (City/State and Zip Code)
For further information concerning this matter, please call:
TSABEL T JUPADO at (718 ) 813 4590 (Area Code & Daytime Telephone Number)
Enclosed is a check for the following amount:
\$25.00 Filing Fee \$\ \text{Certified Copy} \\ \text{(additional copy is enclosed)} \text{ \$\text{\$\subset \text{\$\subset \text{(additional copy is enclosed)}}} \text{ \$\text{\$\subset \text{\$\subset \text{\$\subset \text{(additional copy is enclosed)}}}  \$\text{\$\subset \text{\$\subset \text{\$\subset \text{\$\subset \text{\subset \text{\$\subset \text{\subset \text{\$\subset \text{\subset \text{\$\subset \text{\subset \subset \subset \text{\subset \subset \subset \subset \subset \subset \text{\subset \subset \su

### **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

_	JNP Senior Care, uc	-	
	(Present Name) (A Florida Limited Liability Company)		
FIRST:	The Articles of Organization were filed on October 23, 2006 and assigned document number 10600103077.		
SECOND:	This amendment is submitted to amend the following:		
	ARTICLE IL THE STREET ADDRESS OF the ARINCIPLE		
	OFFICE OF THE LIMITED LIABILITY COMPANY FROM		
	4816 ADNEE CIR ORLANDO, FLUS 32822, to		
	5449 S. Semoran Blud. STE 226. ORLANDO, FL 32822		
	THE MAILING ADDRESS OF the LIMITED LIABILITY COMPANY		
	FROM 4816 ADNEE UR. ORIANDO, FL. US 32822		
	TO 5449 S. Semoran Blud. STE226. ORIANDO, FL 32822		
	SECRETE ANA	06 OCT 3	
DatedO	ctober 26, 2006.	O PHI	
	Signature of a member of a authorized representative of a member	12: 59	
	ISABEL I JUPADO  Typed or printed name of signee		

Filing Fee: \$25.00