

L06000108894

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



600200636856

600200636856
04/11/11--01027--020 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUN 13 PM 4:03

T. HAMPTON

JUN 14 2011

EXAMINER

COVER LETTER

**TO: Registration Section
Division of Corporations**

JD2, LLC T/A DETENTION

SUBJECT: _____
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:

VICTOR M. VERDI

Name of Person

VERDI ASSOCIATES GROUP, INC.

Firm/Company

312 E. VENICE AVENUE SUITE 203

Address

VENICE, FLORIDA 34285

City/State and Zip Code

vmverdi@comcast.net

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

For further information concerning this matter, please call:

VICTOR M. VERDI

Name of Person

at (732) 829-8397

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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 JUN 13 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

April 12, 2011

VICTOR M VBERDI
VERDI ASSOCIATES GROUP INC
312 E VENICE AVE - STE 203
VENICE, FL 34285

SUBJECT: JD2 , LLC
Ref. Number: L06000108894

We have received your document for JD2 , LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The name of the above referenced limited liability company is no longer available. Please file an amendment changing the name of this entity. The fee to file an amendment is \$25.00.

In order to complete your filings, both the reinstatement application and name change amendment must be submitted together along with the applicable fees for processing.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

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

Tammy Hampton
Regulatory Specialist II
Registration/Qualification Section

Letter Number: 011A00008891

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

JD2, LLC

11 JUN 13 PM 4:03

(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 11-09-06 and assigned
Florida document number L06000108894.

This amendment is submitted to amend the following:

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

JDB 529, LLC

The new name must be distinguishable and end with 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)

JOHN BAKER

830 COLONIA LANE

NOKOMIS, FLORIDA 34275

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

830 COLONIA LANE

NOKOMIS, FLORIDA 34275

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: VICTOR M. VERDI

New Registered Office Address: 312 E. VENICE AVE, SUITE 203

Enter Florida street address

VENICE

Florida 34285

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>
MGR	JEFREY DEISMAN	6528 SUPERIOR AVENUE SARASOTA, FLORIDA 34231	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JUN 13 PM 4:03

Dated 4/8/11



Signature of a member or authorized representative of a member

JOHN BAKER

Typed or printed name of signee