106000112229

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COVER LETTER

TO: Registration S Division of Co			
	JSE PROP E RTIES, LLC		
SUBJECT:	Name of Lim	nited Liability Company	1905
The audient Artisles of	f Amoundment and fauta) are sub	unitted for filing	``
	f Amendment and fee(s) are sub	·	
Please return all corresp	ondence concerning this matter	to the following:	
	William I. Mueller		
		Name of Person	
	Viking Associates		
	····	Firm/Company	
	4 Executive Campus, Suite	e 100	
		Address	
	Cherry Hill, NJ 08057		
		City/State and Zip Code	•
	wmueller@vikinggroup.us	to be used for future annual report notif	fication)
For further information	concerning this matter, please c		,
William L. Mueller		856 488-2514 at ()	
Name	of Person	Area Code Daytime	e 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 Addre Registration Division of O P.O. Box 633 Tallahassee,	Section Corporations 27	Street Address: Registration Second Division of Corporate of Tallahassee, FL	porations allahassee e Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FISH HOUSE 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 Florida document number L06000112229	were filed on November 20, 2006 and assigned			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	pility company here:			
The new name must be distinguishable and contain the words "Limited Liabil	ility Company," the designation "LLC" or the abbreviation "L.L.C."			
Enter new principal offices address, if applicable:	c/o Viking Associates			
(Principal office address MUST BE A STREET ADDRESS)	4 Executive Campus, Suite 100			
	Cherry Hill, NJ 08002			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	c/o Viking Associates 4 Executive Campus, Suite 100			
	Cherry Hill 08002			
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, enter the name of the new registered			
New Registered Office Address:				
	Enter Florida street address			
	T71			
	, Florida City Zip Code			

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 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>	Name	<u>Address</u>	Type of Action
AMBR	J.S. FAMILY HOLDINGS, INC.	1550 AVENUE C	
		RIVIERA BEACH, FL 33404	Remove
			Change
MGR	VIKCO, INC.	4 EXECUTIVE CAMPUS, SUITE 100	B Add
		CHERRY HILL, NJ 08002	🗆 Remove
			Change
			□Add
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Note: If the date	if other than the dis listed, the date must be inserted in this blocative date on the Dep	k does not mee	t the applicab	date of filing or me le statutory filing	(opt ore than 90 days afte g requirements, th	ional) or filing.) Pursuant to 6 is date will not be li	05.0207 (sted as t
ne record specifies ord is filed.	s a delayed effective o	late, but not an	effective tim	e, at 12:01 a.m. c	on the earlier of: (b) The 90th day af	ter the
Dated December			2019				
	William L.	, -		• *			