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B. BOSTICK

AUG 2 1 2013

EXAMINER

## **COVER LETTER**

Division of Co	orporations			
SUBJECT: Je	ran, LLC.			
SOLULEI. SC	Name of Limi	ted Liability Company		
The enclosed Articles of	of Amendment and fee(s) are sub	mitted for filing.		
Please return all corresp	oondence concerning this matter	to the following:		
	Janice Kolar		<del></del>	
		Name of Person		
	Brooks Tropical	s Holding, Inc. Firm/Company		
	P.O. Box 900160	Address		
	Homestead, FL	33090-0160 City/State and Zip Code		
	janice@brookstrop E-mail address: (t	oicals.com o be used for future annual report notificat	ion)	
	concerning this matter, please c			2013 AUS 20 SEURLINE
Janice Kol	ar of Person	at (305 ) 247-3544, 6	ext. 7444	
Enclosed is a check for		Alea Coue & Dayline 11	nephone Number	20 PH 4:
■ \$25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing F Certificate of Certified Cop (additional co	Status & U

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

. TO: ' Registration Section

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

Jeran, LLC			
( <u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now ap Limited Liability Compa	ny)	
The Articles of Organization for this Limited Liability	Company were filed on	01/19/2007	and assigned
Florida document number <u>L0700008080</u>	·		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company	here:	
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Co	ompany," the designation	n "LLC" or the abbreviatio
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
			PA E
•			AUL AH
Enter new mailing address, if applicable:			20 AS
(Mailing address MAY BE A POST OFFICE BOX)	<del></del> -		min m
	<del></del>		.21,
			2011 ·
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad	stered office address dress here:	on our records, ente	er the name of the nev
Name of New Registered Agent:			
New Registered Office Address:			
New Registered Office Address.		Enter Florida street (	address
•		, Florida	
	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

/ - <del>- - - / /</del>

MGR = Manager

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:

Title	<u>Name</u>	<u>Address</u>	Type of Action
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D. If an	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
*	Article IV - Management
	The company shall be a Member managed company and the management of
	the LLC. shall be by the sole Member, Brooks Tropicals Holding, Inc.,
	a Florida corporation.
Dated	July 20, 2013.
	Jan-i Kolar
	Signature of a member or authorized representative of a member
	Janice Kolar
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

2013 AUG 20 PH 4: 46