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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

OCT 13 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: CJSJ, 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:

Sylvia J. DUKE
Name of Person

CJSJ, LLC
Firm/Company

2387 TAMiami Tr. S.
Address

Venice, FL 34293
City/State and Zip Code

cedgsylvia@daystar.net
E-mail address. (to be used for future annual report notification)

For further information concerning this matter, please call:

Sylvia J. Duke at (941) 497-6331
Name of Person Area Code & Daytime Telephone Number

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10 OCT 12 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

CJSJ, 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 were filed on March 5, 2007 and assigned Florida document number L070000 24359.

This amendment is submitted to amend the following:

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

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)

2387 TAMiami TRS
VENICE, FL 34293
SAME

10 OCT 12 PM 11:00
FILED
CLERK OF STATE
TALLAHASSEE, FLORIDA

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

SYLVIA J. DUKE

New Registered Office Address:

2387 TAMiami TR.S.

Enter Florida street address

VENICE, Florida 34293
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.

Sylvia J. Duke
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>
MGRM	CHARLES J. DUKE	3588 SHAMROCK DR. VENICE, FL 34293	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGRM	Sylvia J. DUKE	3588 SHAMROCK DR. VENICE, FL 34293	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	EVAN L. DUKE	711 CHANNEL ACRES RD NOKOMIS, FL 34275	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Cindy B. Montgomery	4815 JACARANDA HEIGHTS DR VENICE, FL 34293	<input checked="" 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
10 OCT 12 PM 1:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Dated October 8, 2010.

Sylvia J. Duke
Signature of a member or authorized representative of a member

SYLVIA J. DUKE
Typed or printed name of signee