L0/1000/1014

(1	Requestor's Name)			
(/	Address)			
(,	Address)			
(1	City/State/Zip/Phone #	*)		
PICK-UP	☐ WAIT	MAIL		
(1	Business Entity Name)		
(Document Number)			
Certified Copies	Certificates o	f Status		
Special Instructions	to Filin Officer	JT		
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JUN 1 9 2008 .				
EXAMINER				
AFU				
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Office Use Only



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39 JUN 18 P 3:

COVER LETTER

TO; Registration Se Division of Cor				
SUBJECT: JAMK	KAY, LLC			
	(Name of Lim	ited Liability Company)		
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Nancy Barnes, Paralega	ı		
		(Name of Person)		
	Carey, O'Malley, Whitak	er & Mueller, P.A.		
		(Firm/Company)		
	712 South Oregon Avenu		2000 JUN SECRETA FALLAHAS	
		(Address)	新 皇	
	Tampa, FL 33606		ARY SSEL	
		(City/State and Zip Code)	79 D	
For further information c	concerning this matter, please c	all:	3: 36 STATE ORIDA	O
Nancy Barnes, Paraleg	gal	at (813) 250-0577		
(Name of Person) (Area Code & Daytime Telephone Num			'elephone Number)	
	1			
Enclosed is a check for the	he 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 enclo	osed)

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

Company as it now appears on our Limited Liability Company)	r records.)	
ompany were filed on October 30	, 2007 and assigned	
·		
ited liability company here:		
•		
ds "Limited Liability Company," the	designation "LLC" or the abbreviation	
	7	
(ESS)	7550 Zini	
	HASSEE, FLORIGA	
ered office address on our rec ress here:	ords, <u>enter the name of the ne</u>	
(Enter Flo	rida street address)	
(City)	_, Florida(Zip Code)	
	ted liability company here: ds "Limited Liability Company," the ESS) ered office address on our recress here: (Enter Flo	

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:

MĠR = MGRM	Manager I = Managing Membe	er			
<u>Title</u>	<u>Name</u>		Address		Type of Action
	.				Add Remove
· · ·	<u> </u>				Add Remove
					Add Remove
	_		, 		Add Remove
				P.3	Add Remoye
				Tio.	Addr Remove
D. If a	mending any other in		(s) here: (Attach additional	sheets, if necessary.)	ω · •
					_
					
Dated _	June /3	, 2008			_
			or authorized representative of	a member	
	1.00.00	John J. Kev orkian III, Mai Typed o	nager or printed name of signee		

Page 2 of 2

Filing Fee: \$25.00