# L07000111657

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### COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

Jazco Properties Management, 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:

Jill Pearce

Name of Person

Jazco Property Management, LLC

Firm/Company

5365 W. Atlantic Ave., Suite #504

Address

Delray Beach, FL 33484

City/State and Zip Code

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

For further information concerning this matter, please call:

Jeffrey Zipper, MD

561 241-9300

Name of Person

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

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

2013 JAN 29 PM 1: 37

SECARTARY OF STATE.

Jazco Properties Management, 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 11/5/2007	and assigned
Florida document number L07000111657	·	
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the li</u>	mited liability company here:	
Jazco Property Management, LLC		
The new name must be distinguishable and end with the w "L.L.C."	ords "Limited Liability Company," the design	nation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADI	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or reg registered agent and/or the new registered office ac		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida st	reet address
		rida
	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 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>	Address	Type of Action
MGR	Alexander C Jungreis	1360 Alabama Dr	Add
		Winter Park, FL 32789	Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			_
			Add
			Remove

D. If amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<del></del>	
-	
Dated Jan	uary 28
	Signature at a member or authorized representative of a member
	Jeffrey A Zipper
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

