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COVER LETTER

TO: Registration Section Division, of Corporations				
SURJECT: JJ Asset Managers, LLC				
SUBJECT: JJ Asset Managers, 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 fo	ltowing:			
David W. Southwell, CPA (Name of Person)				
(15)	inc of Persony			
Creative Asset Protection Strategies, Inc.				
(Fi	rm/Company)			
16191 NW 57th Avenue				
	(Address)			
Miami, FL 33014				
	ate and Zip Code)			
For further information concerning this matter, please calt:				
	227 274 222			
David W. Southwell, CPA (Name of Person)	at (305) 621-0220 (Area Code & Daytime Telephone Number)			
(1.6.1.1.1.1.1)	,			
Enclosed is a check for the following amount:				
✓ \$25.00 Filing Fee \$30.00 Filing Fee & \$55	5.00 Filing Fee & S60.00 Filing Fee,			
	Certificate of Status & additional copy is enclosed) Certificate of Status & Certified Copy (additional copy is enclosed)			
MAILING ADDRESS:	STREET/COURIER ADDRESS:			
Registration Section Division of Corporations	Registration Section Division of Corporations			
Division of Corporations	Division of Corporations			

P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJ Asset Managers, 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 tiled on 3/5/2008 and assigned

Florida document number L8000023488

This amendment is submitted to amend the following:

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

JJ Direction LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC".

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:

New Registered Office Address:

(Enter Florida street address)

Florida

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.

(Cin)

(If Changing Registered Agent, Signature of New Registered Agent)

(Zip Code)

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Mar $MGRM = M$	rager lanaging Member		
Title	Name	Address	Type of Action
			Add Remove
All house of section (1974)			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	
			_
Dated			
		or authorized representative of a member	
	John Tur, Manager Tyned a	or printed name of signee	
	131160	or frances outle (a physics	

Page 2 of 2

Filing Fee: \$25.00