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COVER LETTER

TO: Registration Section Division of Corporations				
SUBJECT: JSV & ASSOCIATES, 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:				
John Ornelas (Name of Person)				
JSV & Associates, LLC (Firm/Company)				
86 NE 5th Avenue				
Delray Beach FL 33483 (City/State and Zip Code)				
For further information concerning this matter, please call:				
John Ornelas at (56) 665-8184 (Area Code & Daytime Telephone Number)				
Enclosed is a check for the following amount:				
\$25.00 Filing Fee Solution Filing Fee Certificate of Status Certificate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Certificate of Status Certificate of Status 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



JSV & Asso	ciates, 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 Liab Florida document number	oility Company were filed on 3/21/2008 and assigned 29332			
This amendment is submitted to amend the follow	ving:			
A. If amending name, enter the new name of t	he limited liability company here:			
The new name must be distinguishable and end with "L.L.C." Enter new principal offices address, if applical (Principal office address MUST BE A STREET)	1.			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B	<u>ox</u>			
B. If amending the registered agent and/or registered agent and/or the new registered offi	registered office address on our records, enter the name of the new ce 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.

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

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 = Manager

MGRM = Ma	onaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Vincent A. LaLoggia	86 NE 5th Avenue Delray Beach, FL 33483	Add Remove
MGRM	Scott J. Wheeler	86 NE 5th Avenue Delray Beach, FL 33483	_□ Add _⊠ Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)	_
			- -
Dated <u>& -</u>	-20-08 The Co Ornell	in_	
-	John A.	r authorized representative of a member OFOE OS r printed name of signee	

Page 2 of 2

Filing Fee: \$25.00