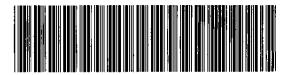
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SECRETARY OF STATION DIVISION OF CONTROL STATION

COVER LETTER

TO:	Registration Se Division of Cor	ction porations	,	,		
CIIDII	ect.	TJ'S VE	NTURES, LLC			
SOPJI	Name of Limited Liability Company					
		Amendment and fee(s) are sub	-			
		JI	EFFREY D BRADLEY			
Name of Person						
TJ			J'S VENTURES, LLC			
			Firm/Company			
8262			2 SILVER BIRCH WA	Y		
			Address			
LEH			IIGH ACRES, FL 3397	1		
TJSVENTU			City/State and Zip Code URES@EMBARQMAI	L.COM		
	E-mail address: (to be used for future annual report notification)					
For fur	ther information c	oncerning this matter, please c	all:			
JEFFREY BRADLEY		at (_239)		3001		
Name of Person			Area Code & D	Daytime Telep	hone Number	
Enclos	ed is a check for th	ne following amount:				
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is end	closed)	\$60.00 Filing Fee, Certificate of Sta Certified Copy (additional copy	
MAILING ADDRESS:		STREET/CO	OURIER AI	DDRESS:		

Registration Section 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

FILED SECRETARY OF STATE DIVISION OF CORPORATION:

10 NOV 29 PH 12: 51

(Name of the Limited L	I'S VENTURES, LLC ability Company as it now appears orida Limited Liability Company)	s on our records.)			
The Articles of Organization for this Limited Liabs Florida document number		MAY 02, 2008 and assigned			
This amendment is submitted to amend the following	ing:				
A. If amending name, enter the new name of th	e limited liability company here	2°			
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Compar	ny," the designation "LLC" or the abbreviation			
Enter new principal offices address, if applicable	le:				
(Principal office address MUST BE A STREET A	ADDRESS)				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO					
B. If amending the registered agent and/or registered agent and/or the new registered office	_	ur records, <u>enter the name of the new</u>			
Name of New Registered Agent:	·				
New Registered Office Address:	Registered Office Address: Enter Florida street address				
_		, Florida			
	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 **Type of Action Address Name** <u>Title</u> TERI P BRADLEY MGRM 8262 SILVER BIRCH WAY ☐ Add Remove LEHIGH ACRES FL 33971 TERI P BRADLEY MBR ✓ Add 8262 SILVER BIRCH WAY Remove LEHIGH ACRES, FL 33971 ☐ Add Remove Add Remove \square Add Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) OCTOBER 13 2010 Dated_ wire of a member or authorized representative of a member JEFFREY D BRADLEY Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00