1881-2008001

(Requestor's Name)			
(Address)			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP	☐ WAIT	MAIL		
	Business Entity Name)			
(Document Number)				
,	,			
Certified Copies	Certificates of S	Status		
Special Instructions to Filing Officer:				

Office Use Only

G. MCLEOD

NOV 18 2010

EXAMINER



100186665851

11/18/10--01026--004 **25.00

10 NOV 18 PM 3: 45
SECRETARY OF STATE

NO #

COVER LETTER

TO: Registration Section Division of Corporations	•	
SUBJECT:	Ultimate Outdoor Parties, LLC	
	Name of Limited Liability Company	
The enclosed Articles of Amendmen	at and fee(s) are submitted for filing.	
Please return all correspondence cor	acerning this matter to the following:	
	Tonya L. Millican	
	Name of Person	/
	Ultimate Outdoor Parties, LLC	/
	Firm/Company	
	12391 Sunchase Dr	
	Address	
·	Jacksonville, FL 32246	
•	City/State and Zip Code	
	tonyas644@hotmail.com E-mail address: (to be used for future annual report notification)	_
For further information concerning t	· · · · · · · · · · · · · · · · · · ·	
To further information concerning t	is maner, piease can.	,
JONNA MIL	11 CW at 501, 259-9988	
Name of Person	Area Code & Daytime Telephone N	umber
Enclosed is a check for the following	g amount:	
	ificate of Status Certified Copy Cer (additional copy is enclosed) Cer	00 Filing Fee, rtificate of Status & rtified Copy ditional 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

Ultim	ate Outdoo	or Parties, LL	.C			
(Name of the Limited L (A F	iability Compa Torida Limited I	ny as it now appea Liability Company)	rs on our records.)			
The Articles of Organization for this Limited Lial	were filed on	May 13, 2008	and assig	ned		
Florida document number L080000478						
This amendment is submitted to amend the follow	ving:					
A. If amending name, enter the new name of t	he limited liab	ility company he	<u>re</u> :			
Jump'N LD.	L.L.C	/				
The new name must be distinguishable and end with "L.L.C."	the words "Limi	ited Liability Comp	any," the designation	"LLC" or the abb	reviation	
Enter new principal offices address, if applicable:		Tonya L. Millican				
(Principal office address MUST BE A STREET ADDRESS)		12391 Sunch	nase Dr			
•		Jacksonville	FL 32246			
•				SKET NOV		
Enter new mailing address, if applicable:		Tonya L. Millican		SS 18		
(Mailing address MAY BE A POST OFFICE BOX)		12391 Sunch	nase Dr	m _c P		
		Jacksonville,	FL 32246	FEST မ		
B. If amending the registered agent and/or registered agent and/or the new registered office			our records, <u>enter</u>	the name of	<u>the new</u>	
Name of New Registered Agent:	Tonya L. Mi	llican				
New Registered Office Address:	12391 Sunchase Dr					
	Enter Florida street address					
	, Florida		32246			
	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 Changing Registered Agent, Signature of New Registered Agent

Page 1 of 2

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:

15

MGR = Manager

MICHAI — IV	tanaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Tracy Emery	3274 Chad Bourne Drive Green Cove Springs, FL 32043	Add Remove
MGR_	Tonya L. Millican	12391 Sunchase Dr Jacksonville, FL 32246	Add Remove
	·		Add Remove
			Add Remove
· ·			Add Remove
		· ·	Add Remove
D. If amend	ling any other information, enter change	e(s) here: (Attach additional sheets, if necessary.)	_
_			_
_			_
Dated [C	1 Dish hu	Da h	
		or authorized representative of a member White Lucy or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00