## L08000057662

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(City/State/Zip/Phone #)				
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T. HAMPTON

JUL - 9 2008

**EXAMINER** 

## **COVER LETTER**

TO: Registration Sec Division of Corp		. , , ,	
SURTECT: JM POF	RT ST LUCIE, LLC		0
SUBJECT.		ited Liability Company)	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspon	ndence concerning this matter	to the following:	
	CHRISTY MEYER		
		(Name of Person)	
	JERSEY MIKES SUBS		
		(Firm/Company)	
	2251 LANDMARK PLAC	E	
		(Address)	
	MANASQUAN, NJ 08736	3	
		(City/State and Zip Code)	
For further information co	oncerning this matter, please co	all:	
CHRISTY MEYER			
(Name o	f Person)	(Area Code & Daytime T	'elephone Number)
Enclosed is a check for the	e 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



DECEIVED

OS JUL -8 PH 12: 19

June 30, 2008

CHRISTY MEYER 2251 LANDMARK PLACE MANAS, NJ 08736

SUBJECT: JM PORT ST LUCIE LLC Ref. Number: L08000057662

We have received your document for JM PORT ST LUCIE LLC and your check(s) totaling \$52.50. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a CORPORATION, but your entity is a LIMITED LIABILITY COMPANY. Please complete and return the enclosed blank form(s).

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

Letter Number: 008A00039008

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JM PORT ST LUCIE, LLC (Name of the Limited (A	Liability Company as it now ap A Florida Limited Liability Compa	pears on our records.) ny)
The Articles of Organization for this Limited L Florida document number L08000057662	iability Company were filed on	6/11/2008 and assigned
This amendment is submitted to amend the follows.  A. If amending name, enter the new name o	· ·	<u>here</u> :
The new name must be distinguishable and end wi "L.L.C."	th the words "Limited Liability Co	ompany," the designation "LLC" or the abbreviation
Enter new principal offices address, if applic	able:	08 AL
(Principal office address MUST BE A STREE	ET ADDRESS)	L CR
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE</u>	<u>BOX)</u>	-PLED L-8 PM 1: 57 ARY OF STATE ASSEE, FLORIDA
B. If amending the registered agent and/ registered agent and/or the new registered of		on our records, enter the name of the new
Name of New Registered Agent:	MICHAEL MANZO	
New Registered Office Address:	262 SW PORT ST LUCIE B	LVD
		(Enter Florida street address)
	PORT ST LUCIE	_, Florida 34984
	(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, Manature of New Registered Agent)

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** MGRM MICHAEL MANZO 2251 LANDMARK PLACE ■ ✓ Add MANASQUAN, NJ 08736 Remove PETER CANCRO MGRM 2251 LANDMARK PLACE **₽** Add MANASQUAN, NJ 08736 ■ Remove Add T Remove ☐ Add Remove Add Remove \_ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated JULY 7 Signature of a member or authorized representative of a member MICHAEL MANZO

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00