

LOG000066488

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 AUG - 8 AM 10:39

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JAS Food Mart LLC  
Name of Limited Liability Company

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SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 AUG -8 AM 10:39

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Rezowan Hossain  
Name of Person  
  
Firm/Company  
  
6710 St. Johns Avenue/Apt. 828  
Address  
  
Palatka, FL 32177  
City/State and Zip Code  
  
mkarim21@yahoo.com  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Rezowan Hossain at ( 386 ) 972-4992  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
11 AUG -8 AM 10:39

JAS Food Mart 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 filed on 7/9/2008 and assigned  
Florida document number L08000066488.

This amendment is submitted to amend the following:

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

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

Enter new principal offices address, if applicable:

(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

(Mailing address **MAY BE A POST OFFICE BOX**)

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: Rezowan Hossain

New Registered Office Address: 6710 St. Johns Avenue/Apt. 828

Enter Florida street address

Palatka

City

Florida

32177

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

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>        | <u>Address</u>                                      | <u>Type of Action</u>  |
|--------------|--------------------|---|--|
| MGRM         | Mohammed A. Jinnah | 2297 Tyson Lake Drive<br>Jacksonville, FL 32221     | <input type="checkbox"/> Add<br><input checked="" type="checkbox"/> Remove |
| MGRM         | Rezowan Hossain    | 6710 St. Johns Avenue/Apt. 828<br>Palatka, FL 32177 | <input checked="" type="checkbox"/> Add<br><input type="checkbox"/> Remove |
|              |                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |
|              |                    |   | <input type="checkbox"/> Add<br><input type="checkbox"/> Remove            |

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

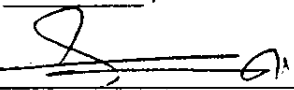
\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Dated 08-05-2011



Signature of a member or authorized representative of a member

Mohammed Jinnah

Typed or printed name of signee