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J. BRYAN

OCT 3.0 2008

EXAMINER

COVER LETTER

TO: Registration S Division of Co		•	
SUBJECT: Jubal E	D		
		ited Liability Company)	-
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Steve Waldoch		
		(Name of Person)	
		(Firm/Company)	
	8509 Little Scenic Lane		98 OCT
		(Address)	29 GF
	Tallahassee, FL 32309		OR P
		(City/State and Zip Code)	08 OCT 29 AM 11: 30
For further information	concerning this matter, please c	all:	
Steve Waldoch		at (850) 212-5028	
(Name of Person)		(Area Code & Daytime T	elephone Number)
Enclosed is a check for	the 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)
Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURIER Registration Section Division of Corporation Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons r Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

OBOCT 29 MIN: 30

Jubal Early Properties, 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 Liabili	ity Company were filed on July 17, 2	2008 and assigned
Florida document number L08000068952	 .	
This amendment is submitted to amend the followin	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," t	he designation "LLC" or the abbreviation
Enter new principal offices address, if applicable		
(Principal office address MUST BE A STREET A	DDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	Z) ·	
B. If amending the registered agent and/or registered agent and/or the new registered office		ecords, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Enter F	Florida street address)
_		
	(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** <u>Title</u> <u>Name</u> **Address** Lauchlin Waldoch MGR 8509 Little Scenic Lane **₽** Remove Tallahassee, FL 32309 ☐ Add Remove Add 🏲 🛅 Remove ☐ Add Remove Add 🗖 ∏ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 10/24/08 Dated Signature of a member or authorized representative of a member

Page 2 of 2

Filing Fee: \$25.00

Typed or printed name of signee