L08000081501

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

Office Use Only



800135103698

09/02/08--01044--002 **45.00

FILED

8 SEP -2 PM 2: 1

SECRETARY OF STATE

T. HAMPTON

SEP - 3 2008

EXAMINER

COVER LETTER

TO: Registration Secti Division of Corpo			
SUBJECT:	JJAG Lakemont,	LLC	
SOBJECT.	(Name of Limit	ted Liability Company)	
The enclosed Articles of An	nendment and fee(s) are subm	nitted for filing.	
Please return all correspond	ence concerning this matter t	to the following:	
	Scott W. Duval	, Esq. (Name of Person)	
	Brennan, Manna	& Diamond, P.L. (Firm/Company)	
	3301 Bonita Be	ach Road, Suite 100 (Address)	
	Bonita Springs	FL 34134 (City/State and Zip Code)	<u>.</u>
For further information cond	cerning this matter, please ca	ll:	
Scott W. Duval, Esq. (Name of Person)		at (<u>239</u>) <u>992–6578</u> (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)

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

BRENNAN, MANNA & DIAMOND, P.L.

3301 Bonita Beach Road ◆ Suite 100 ◆ Bonita Springs, FL 34134 Phone (239) 992-6578 ◆ Facsimile (239) 992-9328

Tracy L. Gonsalves Paralegal tigonsalves@bmdpl.com

August 28, 2008

Registration Section Division of Corporations P. O. Box 6327 Tallahassee, FL 32314

Re: JJAG Lakemont, LLC - Articles of Amendment

Dear Sir/Madam:

Enclosed for filing is the original Articles of Amendment to Articles of Organization of JJAG Lakemont, LLC. Please file the document and forward confirmation of same to our office in the enclosed self-addressed, stamped envelope.

Also enclosed is a check in the amount of \$25.00 representing the filing fee.

If you have any questions, please do not hesitate to contact me.

Macy & Borsalves

Sincerely,

Tracy L. Gonsalves

Paralegal

/tlg

Enclosures

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED
SEP -2 PH 2:54

SECRETARY OF STATE TALLAHASSEE, FLORIDA

JJAG Laken	ACLANASSEL, LONDA
(Name of the Limited Liability Compan (A Florida Limited L	y as it now appears on our records.) ability Company)
The Articles of Organization for this Limited Liability Company	were filed on August 26, 2008 and assigned
Florida document number <u>L08000081501</u> .	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liabi	lity company here:
The new name must be distinguishable and end with the words "Limit "L.L.C."	ed Liability Company," the designation "LLC" or the abbreviation
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 off registered agent and/or the new registered office address here	· · · · · · · · · · · · · · · · · · ·
Name of New Registered Agent:	
New Registered Office Address:	(Enter Florida street address)
	·
	Florida

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.

(City)

(Zip Code)

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
MGR	Andrew Toth	675 Echo Drive Ottawa ON KlSlP-2 CN	Add X Remove
MGR	Judith Toth	675 Echo Drive Ottawa, ON KlS 1P2 CN	Add Remove
			Add Remove
D. If amend	ling any other information, enter chan	ge(s) here: (Attach additional sheets, if necessar	ry.)
			FILED 08 SEP -2 PH SECRETARY OF S FALLAHASSEE, FL
	August 28, 20	08	2: 54 ORIDA
	Signature of a memb	er or authorized representative of a member	
	Scott W. Duval, Esq.	nd or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00