p.1

Page 1 of 1

Florida Department of State

Division of Corporations Public Access System

Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H080002726073)))



H080002726073ABC%

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page.

Doing so will generate another cover sheet.

Tc:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BURGESS, HARRELL, MANCUSC, OLSON & COLTON, P.

Account Number : I20000000104 Phone : (941)366-3700

Fax Number : (941) 366-0189

OB DEC 12 AM 8: 47

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

JENNETTE PROPERTIES HOMEOWNERS & CONDOMINIUM ASSOCIA

RECEIVED
08 DEC 12 AM 9: 51
SECHETGAY OF STATE
TALLAHASSEE, FLORIDA

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

DEC. 152008



December 12, 2008

FLORIDA DEPARTMENT OF STATE Division of Corporations

BURGESS, HARRELL

SUBJECT: JENNETTE PROPERTIES EOMEOWNERS & CONDOMINIUM ASSOCIATION

MANAGMENI, L.L.C REF: L08000085422

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The electronic filing cover sheet submitted with your document reflects the incorrect type of document. The cover sheet must reflect the type of document you are filing. Please generate a new fax audit cover sheet under the appropriate document type. When resubmitting your document for filling, please also send a copy of the incorrect cover sheet marked "ABANDONED".

Please return 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) 245-6067.

Neysa Culligan Document Specialist FAX Aud. #: B08000272053 Letter Number: 708A00060163

P.O BOX 6327 - Tallahassee, Florida 32314

9413661073 H080002720533

ARTICLES OF AMENDMENTO 12 AM 8: 47 TO ARTICLES OF ORGANIZATED NIASSEE FLORIDA OF

Jennette Properties Homeowne		
(<u>Name of the Limited Liah</u> (A Flor	ility Company as it now appears ida Limited Liability Company)	on our records.)
The Articles of Organization for this Limited Liability	ty Company were filed on Septe	ember 8, 2008 and assigned
Florida document number L08000085422	······································	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here	1
JENNETTEPROPERTIES.COM, LLC		
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Compan	y," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office a	gistered office address on ou address here:	r records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	(Ente	er Florida street address)
<u> </u>		, Florida
	(Cip)	(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

HO80002720533

HOSCOOR 720533
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 = M MGRM =	anager Managing Member		
Title	Name	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Renxove
			Add Remove
			Add Remove
 	ecember 11 , 200	s) here: (Attach additional sheets, if necessary.	08 DEC 12 AM 8: 47 SECRETARY DE STATE FALTI AHASSEE PLORIDA
	Signature of a grembey of Tames H	rauthorized representative of a member Burgess Topinted name of signers	hve_

Page 2 of 2

Filing Fee: \$25.00

HO 8000272053 3