Division of Corporations 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.

(((H100000142193)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BLALOCK, WALTERS, HELD & JOHNSON

Account Number , 076666003611

Phone

; (941)748-0100

Fax Number

; (941)745-2093

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Emari 1	1447648.	

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN J. L. RICE ENTERPRISES, LLC

Certificate of Status	. 1
Certified Copy	1
Page Count	02
Estimated Charge	\$60.00

Electronic Filing Menu

Corporate Filing Menu

Help

Fax Audit # (((H10000014219 3)))

ARTICLES OF AMENDMENT TOARTICLES OF ORGANIZATION OF

J.L. RICE ENTE	RPRISES, LLC	
(Name of the Limited Liability Compa (A Florida Limited).	ny as it now appears on our records.)	
(**: **********************************		
The Articles of Organization for this Limited Liability Company	were filed on11/03/2008 and assigned	
Florida document number L08000102826		
-		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
J. RICE ENTERI	PRISES, LLC	
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Company," the designation "LLC" or the abbreviation	
Enter new principal offices address, if applicable:	6430 14th Street W	
(Principal office address MUST BE A STREET ADDRESS)	Bradenton, FL 34207	
		
Enter new mailing address, if applicable:	7921 9th Ave, NW	
(Mailing address MAY BE A POST OFFICE BOX)	Bradenton, FL 34209	
B. If amending the registered agent and/or registered of		
registered agent and/or the new registered office address her	<u>e</u> :	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City Zip:Code	
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agr the provisions of all statutes relative to the proper and comp		
accept the obligations of my position as registered agent as j	provided for in Chapter 608, F.S. Or, if this document is T	
being filed to merely reflect a change in the registered office company has been notified in writing of this change.	address, I hereby confirm that the limited liability	
<u> </u>		
If Chai	nging Registered Agent, Signature of New Registered Agent CO	

Fax Audit # (((H10000014219 3)))

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

MGRM John C. Rice 7702 16th Ave. NW 7 Add Bradenton EL 34209 Remove	Title	<u>Name</u>	Address	Type of Action
Bradenton FL 34209 Remove MGRM Joseph S. Rice 7921 9th Ave. NW Add Remove	MGRM	John L. Rice		[7] Add
Bradenton Fl 34209 Remove Add Remove	<u>MGRM</u>	John C. Rice		
Dated Signature of a member or authorized representative of a member Add Remove	MGRM	Joseph S. Rice		
Dated January 21 2010 Signature of a member or authorized representative of a member Action Luter, Authorized Representative Page 2 of 2 Filling Fee: \$25.00	<u></u>			
Dated January 21 2010 Signature of a member or authorized representative of a member Metanic Luten, Authorized Representative Page 2 of 2 Filing Fee: S25.00				Add Remove
Signature of a member or authorized representative of a member Medanic Luten, Authorized Representative Page 2 of 2 Filling Fee: \$25.00				
Signature of a member or authorized representative of a member Metanic Luten, Authorized Representative Typed or printed name of signee Page 2 of 2 Filling Fee: \$25.00	D. If amen	ding any other information, ente	er change(s) here: (Attach additional sheets, if necessa	n)
Signature of a member or authorized representative of a member Metanic Luten, Authorized Representative Typed or printed name of signee Page 2 of 2 Filling Fee: \$25.00	_			•
Signature of a member or authorized representative of a member Metanic Luten, Authorized Representative Typed or printed name of signee Page 2 of 2 Filling Fee: \$25.00	<u> </u>			
Melanic Luten, Authorized Representative 17 a member 17 pped or printed name of signee 17 pped or printed name of signee 17 pped 17 pp	Dated	Danuary 21	2010	(-m -
Page 2 of 2 Filing Fee: \$25.00				ASS PASS
Filing Fee: \$25.00			Typed or printed name of signee	3 E 8
<u>ت</u> بن سے اس				1 088 1 0 5
			-	