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(Ac	idress)	
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MAY 1 0 2013 D. BUTLER

COVER LETTER

TÒ:	Registration Section Division of Corpo			
SUBJI	ECT:	Name of Limite	d Liability Company	
The en	closed Articles of Ar	mendment and fee(s) are subm	nitted for filing.	2 th 3
Please	return all correspond	lence concerning this matter to	o the following:	
		Bill	S cages Name of Person	3 MY -9 M 3:02
		JBL	S LLC Firm/Company	02
		232 Royal	Palm Way Address	
		Soca Raton	FL 33432 City/State and Zip Code	
		Scagasde E-mail aldress: (to	comcast. Net be used for future annual report notificati	on)
For fur	ther information con	cerning this matter, please cal		
	Steve S Name of P	erson	at (<u>240) 372-04</u> Area Code & Daytime To	llephone Number
Enclos	ed is a check for the	following amount:		
\$25	5.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

AMICS.	JBSL, LLC	
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our prida Limited Liability Company)	records.)
The Articles of Organization for this Limited Liabi Florida document number	ility Company were filed on 12/4/	and assigned
This amendment is submitted to amend the following	ng:	
A. If amending name, enter the new name of th	e limited liability company here:	8
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Company," the o	designation "LLC" or the abbreviation
Enter new principal offices address, if applicabl	e: 232 Royal F	Palm Way
(Principal office address MUST BE A STREET A	e: 232 Royal f ADDRESS) Bown Raton	FL 33432
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<u> </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		rds, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:	Enter Flori	da street address
	2	
-	City	, Florida 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

Title Address Type of Action Name 2061 Thatch Palm Dr WAdd MGR Steven Sungas Boca Raton FL, 33432 Remove James A Mac Cutcheon 429 E Alexander Palm Rd JAdd MGR Bora Raton FL Remove 33432 Remove Add Remove Remove

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
i	, <u> </u>	
	Signature of a member of authorized representative of a member	
	Cill Scagg Typed or publied name of signee	
-	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

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