

| (Requestor's Name) |
|---|
| 43265 Pineridge Drive Callahan 7232011 |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
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SECKETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE
SEP 2 2 2009
EXAMINER

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limited (A | JJ Solution Liability Compa Florida Limited I | ons, LLC ny as it now appears on ou Liability Company) | ır records.) | | |
|--|--|--|-----------------------|-------------------------|--|
| The Articles of Organization for this Limited Liz Florida document numberL0900002 | | were filed onJanua | ary 7, 2009 | and assigned | |
| This amendment is submitted to amend the follo | wing: | | | | |
| A. If amending name, enter the new name of | the limited liab | oility company here: | | | |
| The new name must be distinguishable and end with "L.L.C." | n the words "Lim | ited Liability Company," the | designation "I | LC" or the abbreviation | |
| Enter new principal offices address, if applicable: | | 43265 Pineridge Dr | | | |
| (Principal office address MUST BE A STREET ADDRESS) | | Callahan, Fl 32011 | | | |
| Enter new mailing address, if applicable: | | 43265 Pineridge Dr | • | 09 SEP | |
| (Mailing address MAY BE A POST OFFICE BOX) | | Callahan, Fl 32011 | | SSE 2 | |
| B. If amending the registered agent and/o registered agent and/or the new registered off | | | cords, <u>enter t</u> | he maine of the new | |
| Name of New Registered Agent: | Justin Moore | | | | |
| New Registered Office Address: | ridge Dr Enter Flor | rida street add | ress | | |
| | | Callahan | , Florida | 32011 | |
| | | 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 Changing Registered Agent, Signature of New Registered Agent

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 **Address Title Name** Type of Action **MGRM** John Paul Kilduff II 14042 Wild Hammock Trail Jacksonville FL 32226 √ Remove ☐ Add Remove ☐ Add Remove □Add Remove ∏Add Remove $\prod Add$ Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated

Page 2 of 2

Typed or printed name of signee

Signature of a member or authorized representative of a member

Filing Fee: \$25.00