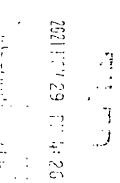
(Requestor's Name)	
(Address)	100377
(Address)	100077
(City/State/Zip/Phone #)	
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(Document Number)	
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COVER LETTER

TO: Registration S Division of Co					
SUBJECT: FP Jenkins		ited Liability Company			
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspondence	ondence concerning this matter	to the following:			
	John Sneep				
	- Com Cate	Name of Person	 		
		Firm/Company	******		
	9260 Dundee Drive	Address			
	Lake Worth Fl 33467	City/State and Zip Code			
	johnsneep@gmail.com E-mail address: (to be used for future annual report notice	fication)		
For further information of	concerning this matter, please e	all:		20211757	
John Sneep Name o	of Person	at (561) 801 3543 Area Code Daytim	e Telephone Number		
Enclosed is a check for t	he following amount:				j
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (e of Status &	

TO:

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

Street Address:

Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FP Jenkins Road LLC (Name of the Limited Liabili	ity Company as it now appears on our records.)		
(A Florid	ity Company as it now appears on our records.) a Limited Liability Company)		
The Articles of Organization for this Limited Liability C	Company were filed on Feb 5, 2009	and assigned	i
Florida document number 1.09000012314			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company here:		
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."	
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD)	RESS)		
Enter new mailing address, if applicable:			
(Mailing address MAY BE A POST OFFICE BOX)			
		<u> </u>	
B. If amending the registered agent and/or registere	d office address on our records, enter the nan	ne of the new reg	istere
agent and/or the new registered office address here:	office address on our records, <u>enter the nati</u>	ne of the new reg.	131010
		2	
Name of New Registered Agent:			
Nous Possistated Office Address		÷ ;	. 28
New Registered Office Address:	Enter Florida street address		1 5
	, Florida	<u>+</u> +	
	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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			Change
			□Add
			□Remove
-			□Add
			□Remove
			□Change
			□ Add
			□Change.
			
			□Remove
			□Change
			🗀 Add
			□Remove
			☐Change

The manager of the Limited Liability Company is John Sneep, 9260 Dundee Drive, Last If John Sneep resigns, becomes incapacitated, or is unable to serve for any reason, or description of Sneep, 9260 Dundee Drive, Lake Worth FI 33467 shall become the successor Manager Liability Company. If Rose Sneep resigns, becomes incapacitated, or is unable to serve dies, then Mark Sneep 7500 217th St North Forest Lake Mn 55025 shall become the sum Manager of the Limited Liability Company.	of the Limited for any reason or ccessor
Sneep, 9260 Dundee Drive, Lake Worth FI 33467 shall become the successor Manager Liability Company. If Rose Sneep resigns, becomes incapacitated, or is unable to serve dies, then Mark Sneep 7500 217th St North Forest Lake Mn 55025 shall become the su Manager of the Limited Liability Company.	of the Limited for any reason or ccessor
Liability Company. If Rose Sneep resigns, becomes incapacitated, or is unable to serve dies, then Mark Sneep 7500 217th St North Forest Lake Mn 55025 shall become the su Manager of the Limited Liability Company.	for any reason or ccessor 202 1 20 2 2
dies, then Mark Sneep 7500 217th St North Forest Lake Mn 55025 shall become the su Manager of the Limited Liability Company.	2027 2027 2027 2027 2027 2027 2027 2027
Manager of the Limited Liability Company.	2021 1177 29 Fit 4: 8
	2021 H. 177 2 D. F. F. Ha P. P. P. P. P. Ha P. P. P. P. Ha P.
	021 1177 29 Fit 4: 2
	021 1177 29 Fit 4: 2
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ective date, if other than the date of filing: n effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 of the date inserted in this block does not meet the applicable statutory filing requirement at the date on the Department of State's records.	
secord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlies filed.	er of: (b) The 90th day after
Signature of a member or ahthorized representative of a member	т

Filing Fee: \$25.00