

L09000012383

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

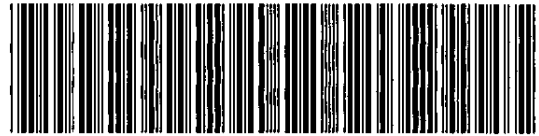
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FILED
2009 FEB 24 PM 2:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

FEB 25 2009

EXAMINER

COVER LETTER

TO: **Registration Section**
Division of Corporations

SUBJECT: JAX ORGANICS LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Bruce W. Martz
(Name of Person)

Jax Organics LLC
(Firm/Company)

3840 Calico Trail
(Address)

Jacksonville, FL 32277
(City/State and Zip Code)

For further information concerning this matter, please call:

Bruce W. Martz at (904) 608-8949
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for the following amount:

- | | | | |
|---|--|--|---|
| <input type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input checked="" type="checkbox"/> \$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**

FILED

2009 FEB 24 PM 2:00

JAX ORGANICS LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on February 6, 2009 and assigned
Florida document number L09000012383.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

Bruce W. Martz

(Principal office address MUST BE A STREET ADDRESS)

3840 Calico Trail

Jacksonville, FL 32277

Enter new mailing address, if applicable:

3840 Calico Trail

(Mailing address MAY BE A POST OFFICE BOX)

Jacksonville, FL 32277

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Bruce W. Martz

New Registered Office Address:

3840 Calico Trail

(Enter Florida street address)

Jacksonville

(City)

, Florida 32277

(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:

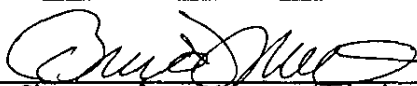
MGR = Manager

MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Bruce W. Martz	3840 Calico Trail Jacksonville, FL 32277	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Jim Seidel	5110 Bridelewood Court Ponte Vedra Beach, FL 32082	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Leslie Seidel	5110 Bridelewood Court Ponte Vedra Beach, FL 32082	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated February 23, 2009



Signature of a member or authorized representative of a member

Bruce W. Martz

Typed or printed name of signee

FILED
2009 FEB 24 PM 2:00
TALLAHASSEE, FLORIDA
SECRETARY OF STATE