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Office Use Only



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SECRETARY OF STATE
FAIT ANASSEE, FLORID

T. CLINE

OCT 2 7 2010

EXAMINER

October 20, 2010

ALEX SKKOP 2900 N. MILITARY TR SUITE 140 BOCA RATON, FL 33431

SUBJECT: JUL PROPERTIES LLC Ref. Number: W10000049343

We have received your document for JUL PROPERTIES LLC and your checks) totaling \$160.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

This document was previously filed on March 3, 2009.

If you are trying to change the information listed on the company already of the you will have to file a amendment.,

We are enclosing the proper form(s) with instructions for your convenience.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6020.

Tammi Cline Regulatory Specialist II

Letter Number: 910A00024810

FILED

COVER LETTER

CT:	Tul P		
C1:		poperties 111	
	Name of Limi	eoperties UC ted Liability Company	
osed Articles of A	Amendment and fee(s) are sub	omitted for filing.	
eturn all correspor			
	Alexa	udu SVeg Name of Person	
	Jul	properties all	SECRE
	2900 N. X	Address	<u>k 190</u> SSE 26 E
	Boca Ro	John Pl 33431	D STATE
•	elex B A	20ya(F/p. com) to be used for future annual report notification	3
er information co	ncerning this matter, please c	all:	
erandy Name of	Sulys	at (<u>561)</u> <u>445-2122</u> Area Code & Daytime Tele	phone Number
l is a check for the	e following amount:		
00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Registra Division P.O. Bo	tion Section a of Corporations x 6327	STREET/COURIER A Registration Section Division of Corporations Clifton Building	s
	eturn all corresponder information control of the c	Alexa Alexa Alexa Alexa Bioca Ro E-mail address: (interinformation concerning this matter) The second of Person Alexa Bioca Ro Bioca Ro	Alexander Shape Such Formal Such Registration Section Person Alexander Shape Such Classes Address Boca Radon Pl 33431 City/State and Zip Code Alexander Such Registration Section Po Filing Fee Such Status MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Cliffon baulding Person Person Person Alexander Shape Such Cliffon Such Status Address Boca Radon Pl 33431 City/State and Zip Code Alexander Such Such Such Such Such Such Such Such

Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jul	Properties (LC
(Name of the Limited Liat (A Flor	oility Company/as it now appears on our reco ida Limited Liability Company)	ords.)
The Articles of Organization for this Limited Liabili	ty Company were filed on <u>3-3-0</u> 6	and assigned
This amendment is submitted to amend the followin	g:	
A. If amending name, enter the new name of the	limited liability company here:	
		16 17A
The new name must be distinguishable and end with the 'L.L.C."	words "Limited Liability Company," the desig	nation "LCCOr the abbreviation
Enter new principal offices address, if applicable		26 85E
Principal office addr <u>ess MUST BE A STREET Al</u>	DDRESS)	AN III
•		電点 27
Enter new mailing address, if applicable:		All the sales of all th
Mailing address MAY BE A POST OFFICE BOX	<u>· </u>	
B. If amending the registered agent and/or registered agent and/or the new registered office		enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida si	turat address
,	Enter Ptorida si	reei aaaress
·	····································	orida
	Citv	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 = M MGRM =	1anager ■ Managing Member		
<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			Add
			Remove
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D. Ifame	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.)
Di ti unio	Need to Replace	sitles for Alexander Sh	kes
_	from President Lo	sitles for Alexander Shis MGRM	
-	Grek Shop	from VP to MOR	
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-	12/2/10		
Dated	10/28/10		
	Alexander	er or authorized representative of a member	··
	Signature of a memory	an UC SHKOP d or printed name of signed	
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Page 2 of 2

Filing Fee: \$25.00