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Law Offices of Frye & Associates.

Austin A. Fryc, Esq.
Also admitted in MA

Attorneys at Law

Asset Protection Corporate Planning Probate Administration Estate & Trust Planning Trust Administration Guardianship

FAX COVER LETTER

5-110/10

DATE:	3)!7/10		
TO:	Brenda - Division of Corps	<u>. </u>	
FROM:	Laura Brown, Esq.	_ <u>4</u> ~	≟.
FAX NUMBER:	850-745-6030	_ £ ₩	10 MAY
NO. OF PAGES:	4	33884 7845	1
REGARDING:	Name Change to S.TF, LLC	OF STATI	23
ADDITIONAL COM	IMENTS:	≯m	=
Pursuant to y	our conversation on 4/30/10, attached please fine	1 the	
	inducent to Articles of Organization of SIC,		
	hame to SJF Group, LLC		
	ned that since the initial error in allowing the		
be assigned was	made by your reportment, there would be no	fee -	for
this Amendme	nt.		_
Please Call	nt. with any questions. Thank you in advance.		
	Regards -		

CONFIDENTIALITY NOTE: The information contained in this facsimile message is privileged and confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution, or copy of this facsimile is strictly prohibited. If you have received this facsimile in error, please notify us immediately by telephone and return the original message to us at the address above. Thank you,

COVER LETTER

10:	Division of Cor				
SUBJE	ECT:	SJ	F, L.L.C.		
Name of Limited Liability Company					
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
		ondence concerning this matter			
		LAURA A. BROWN, ESQ.			
			Name of Person		
	LAW OFFICES OF FRYE & ASSOCIATES, PL				
	Firm/Company				
		20900	WEST DIXIE HIGHWAY		
			Address		
		AVE	NTURA, FLORIDA 33180		
			City/State and Zip Code		
		LAURA	@FRYELAWMIAMI.COM		
_		· ·	•	auon)	
For fur	ther information of	concerning this matter, please of	all:		
	LAUI	RA A. BROWN	at (305) S	331-3200	
Name of Person		of Person	Arca Code & Daytime	Telephone Number	
Enclos	ed is a check for t	he following amount:			
\$25	5.00 Filing Fec	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	Regist	JNG ADDRESS: ration Section on of Corporations	STREET/COURI Registration Section Division of Corpora	า	

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION

SJF, L.L.C.				
(Name of the Limited Liability Company as it now appears on our records,) (A Florida Limited Liability Company)				
(A Florida Limited Liability Company)				
The Articles of Organization for this Limited Liability Company were filed onMAY 1, 1998 and assigned				
Florida document numberL09000022848				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liability company here:				
SJF GROUP, LLC				
The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviatio "L.L.C."				
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
S 30.				
Enton was welling address if applicables				
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BOX)				
<u> </u>				
2				
B. If amending the registered agent and/or registered office address on our records, enter the name of theme				
registered agent and/or the new registered office address here:				
None Are to the later				
Name of New Registered Agent:				
New Registered Office Address:				
Enter Florida street address				
, Florida				
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				

OF

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 = Mar MGRM = M	nager Ianaging Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
	~~~		Add Remove
D. If amend	ling any other information, enter chang	e(s) bere: (Attach additional sheets, if necessary.)	
<u>-</u>			<del></del>
			<del>-</del>
Dated	Laura	a. Brown	
		or authorized representative of a member  A - Brown or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00