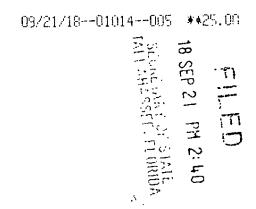
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# **COVER LETTER**

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TO: Registration Section Division of Corporations
SUBJECT: Bluchdrifter Properties 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:
William K. Jerwick SR Name of Person
_
Brachdrifter Properties LLC
Firm/Company
8129 Beach Blvd Address
Address
Jax. J. 32216  City/State and Zip Code
City/State and Zip Code
E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
William K. Jenwill JR.  Name of Person  Area Code  Daytime Telephone Number
Name of Person Area Code Daytime receptione Number
William K. Jerwick St. 904.237-6929
Enclosed is a check for the following amount:
\$25.00 Filing Fee Solution Status Solution Sta

### 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

Beachdrifter Proj	perties	LLC.			
( <u>Name of the Limited Liability Compan</u> (A Florida Limited Li	v as it now appea ability Company)	rs on our records.)		_	
The Articles of Organization for this Limited Liability Company v Florida document number <u>LO900009648</u>	vere filed on	<u>3/24/200</u>	and	l assign	ied
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liabil	ity company h	ere:			
N/A			- L44 - 1 .1		
The new name must be distinguishable and contain the words "Limited Liability		lesignation "LLC" or the		œ	•
Enter new principal offices address, if applicable:	N/9			S <del>EP</del>	TT
(Principal office address MUST BE A STREET ADDRESS)		<u> </u>	1945. 7865	<u>~</u>	
			741-A	P	
Enter new mailing address, if applicable:	Na		<u> </u>	2:	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)			_ \$r	0	
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		i our records, <u>ent</u>	er the na	me of	the ne
Name of New Registered Agent: N/2					
New Registered Office Address:	Enter Flo	rida street address			
	City	, Florida	Zip C	ode	
New Registered Agent's Signature, if changing Registered Agent:	•		,		
I hereby accept the appointment as registered agent and agre-	e to act in this	canacity I forther	aaraa to c	omnlu	with th
provisions of all statutes relative to the proper and complete paccept the obligations of my position as registered agent as probeing filed to merely reflect a change in the registered office of	performance of rovided for in (	my duties, and I an Chapter 605, F.S. C	n familiar Dr. if this a	with a locume	ınd

company has been notified in writing of this change.

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 Title Address Type of Action Name Beachdriffer Properties LK 8129 Beach Blud JAN. FI 32216 Remove ☐ Change Fenuick Jamely Enterprises LLC MGRN Add 8129 Beach Blud ☐ Remove Jax. F1 32216 Change □ Add ☐ Remove ☐ Change □ Add ☐ Remove

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		elayed effecti e record is fil		: not an effe	ctive time, a	t 12:01 a.m	n. on the	e earli	er o
Dated Se	pt 18			Merce A					

Page 3 of 3

Filing Fee: \$25.00