

L09000031859

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

W  
MAY 22 2009

J. BRYAN

JUN 11 2009

EXAMINER

1001-17457



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

May 22, 2009

MARY E. WALKUP  
1550 HARBOR WAY  
BARTOW, FL 33830

SUBJECT: JWALK LLC  
Ref. Number: L09000031859

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TALLAHASSEE, FLORIDA

We have received your document for JWALK LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

We didn't receive the complete form

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

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

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) 245-6043.

Joey Bryan  
Regulatory Specialist II

Letter Number: 609A00017457

**COVER LETTER**

TO: Registration Section  
Division of Corporations

SUBJECT: Jwalk 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:

Mary Walkup  
Name of Person  
c/o Jwalk, LLC  
Firm/Company  
1550 Harbor Way  
Address  
Portau FL 33830  
City/State and Zip Code  
JWALK LLC @ Rocketmail.com  
E-mail address: (to be used for future annual report notification)

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TALLAHASSEE, FLORIDA

For further information concerning this matter, please call:

Mary Walkup at (863) 533-9829  
Name of Person Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee  
*I have*  
*Sent in*  
*Already Paid*  
☐ \$30.00 Filing Fee & Certificate of Status  
☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)  
☐ \$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**  
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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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

The Articles of Organization for this Limited Liability Company were filed on 04-01-09 and assigned  
Florida document number LO9005031859

This amendment is submitted to amend the following:

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

N/A  
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:

N/A  
(Principal office address **MUST BE A STREET ADDRESS**)

Enter new mailing address, if applicable:

N/A  
(Mailing address **MAY BE A POST OFFICE BOX**)

**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:

N/A  
New Registered Office Address:

Enter Florida street address

City, 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.

N/A  
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

Title	Name	Address	Type of Action
MGR	James T. Walkup	1550 Harbor Way Bartow FL 33830	<input checked="" type="checkbox"/> Add <input 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
			<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

June 9, 2009

★

Mary E. Walkup

Signature of a member or authorized representative of a member

Mary Walkup

Typed or printed name of signer

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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