

LD9000061643

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



200182814182

07/06/10--01019--011 **25.00

FILED
10 JUL -6 PM 4:10
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

JUL 07 2010

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Jaylen Arnold's Challenge, 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:

Robin Arnold

Name of Person

Jaylen Arnold's Challenge, LLC

Firm/Company

P.O. Box 93653

Address

Lakeland, FL 33804

City/State and Zip Code

JaylensChallenge@aol.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Robin Arnold

Name of Person

at (863) 860-7724

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:



\$25.00 Filing Fee



\$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

FILED
10 JUL -6 PM 4:10
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Jaylen Arnold's Challenge, 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 6/25/2009 and assigned
Florida document number LO9000061643.

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:

(Principal office address MUST BE A STREET ADDRESS)

2592 Iris Ann Drive
Lakeland, FL 33810

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

P.O. Box 93653
Lakeland, FL 33809

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:

New Registered Office Address:

2592 Iris Ann Drive

Enter Florida street address

Lakeland

City

Florida 33810

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

Title	Name	Address	Type of Action
MGR	Jaylen M. Arnold	4355 Corporate Ave. #124 Lakeland, FL 33809	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Robin Arnold	4355 Corporate Ave. #124 Lakeland, FL 33809	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Jaylen M. Arnold	P.O. Box 93653 Lakeland, FL 33804	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Robin Arnold	P.O. Box 93653 Lakeland, FL 33804	<input checked="" 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.)

FILED
10 JUL - 6 PM 4:10
CLERK OF DISTRICT COURT
STATE OF FLORIDA

Dated _____

Jaylen Arnold
Signature of a member or authorized representative of a member
Jaylen Arnold
Typed or printed name of signee