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J. SAULSBERRY EXAMINER MAY 17 2011

## **COVER LETTER**

TO:	Registration Section Division of Corporations	
SUBJI	Name of Limited Liability Company	pany LLC
The en	closed Articles of Amendment and fee(s) are submitted for filing.	
Please	return all correspondence concerning this matter to the following:	
	IAN LUTHRINGER,	ESQ.
	HINSHAW & CULBERTS	SON LLP
	Firm/Company	
	50 N. LAURA STREET, S	UITE 2200
	Address	
	JACKSONVILLE FL 3	32233 = - ~
	City/State and Zip Code	
	ILUTHRINGER@HINSHAW	
For fur	E-mail address: (to be used for future annua her information concerning this matter, please call:	Table 1 amount
	IAN LUTHRINGER, ESQ. at ( 904 )	359-9620 RAI Gentlember Devime Telephone Number
	····	de & Daytime Telephone Number
Enclose	ed is a check for the following amount:	
<b>□\$25</b>	00 Filing Fee \$\text{S55.00 Filing Fee & Certified Copy (additional copy}}    Certificate of Status   Certified Copy (additional copy	Certificate of Status &
	Registration Section Registr Division of Corporations Divisio P.O. Box 6327 Clifton Tallahassee, FL 32314 2661 E	ET/COURIER ADDRESS: ation Section n of Corporations Building xecutive Center Circle ssee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

THE JAMES	SON & COMPANY,	LLC	
( <u>Name of the Limited Liabilit</u> (A Florida	Limited Liability Company)	<u>rs on our records.</u> )	
The Articles of Organization for this Limited Liability	Company were filed on	10/29/2009	and assigned
Florida document numberL09000104266			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lim	nited liability company her	<u>re</u> :	
JAMESON	I INVESTMENTS, LLC		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Compa	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADD	RESS)		
			70 70
			LARGE AT THE
Enter new mailing address, if applicable:			<b>&gt;</b>
(Mailing address MAY BE A POST OFFICE BOX)			RY SSE
	·		TO P
			95 ÷
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on o	our records, enter t	he name of the new
and the second and the new registered office and	ires nere.		
Name of New Registered Agent:			
New Registered Office Address:			
	En	ter Florida street addı	ress
		, 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

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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
<del></del>			Add Remove
	·		AddRemove
D. If amend	ding any other information	, enter change(s) here: (Attach additional she	Peets, if necessary.) STATE OF STATE OF STATE
Dated	MAY 11		
	Signati	are of a member or authorized representative of a m	nember
	- <b>G</b>	IAN LUTHRINGER, ESQ.	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00