

L09000116085

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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JUN 28 2010

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JUN 21 AM 10:02

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: J&J Concierge And Transportation Services 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:

Tim McGrath

Name of Person

Firm/Company

555 Challenger Rd

Address

Cape Canaveral, FL 32920

City/State and Zip Code

ttmcgrath@yahoo.com

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

For further information concerning this matter, please call:

Tim McGrath

Name of Person

at (321)

868-8888

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

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

J&J Concierge and Transportation Services 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 12/7/2009 and assigned
Florida document number L09000116085

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 "LLC."

Enter new principal offices address, if applicable:
(Principal office address **MUST BE A STREET ADDRESS**)

555 Challenger Rd
Cape Canaveral, FL 32920

Enter new mailing address, if applicable:
(Mailing address **MAY BE A POST OFFICE BOX**)

555 Challenger Rd
Cape Canaveral, FL 32920

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:

Timothy Thomas McGrath

New Registered Office Address:

3513 West Roundtree Dr.

Enter Florida street address

Cocoa

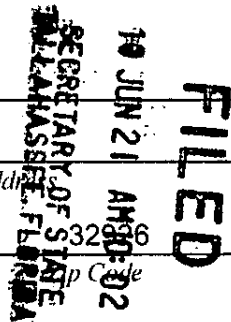
Florida

City

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.

Timothy Thomas McGrath
If Changing Registered Agent, Signature of New Registered Agent



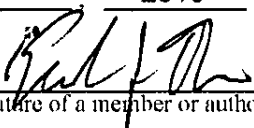
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Timothy Thomas McGrath	3513 W. Roundtree Dr. Cocoa, FL 32926	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Edward Tobin	4700 North Atlantic Ave #308 Cocoa Beach, FL 32931	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Jennifer Hastbeck	4700 North Atlantic Ave #308 Cocoa Beach, FL 32931	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
S	Edward Tobin	4700 North Atlantic Ave #308 Cocoa Beach, FL 32931	<input type="checkbox"/> Add <input checked="" 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 11, 2010



Signature of a member or authorized representative of a member
Edward Tobin

Typed or printed name of signee