## L10000030082

(Requestor's Name)					
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PICK-UP	WAIT     WAIT     WAIT	MAIL			
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Certified Copies	_ Certificates	of Status			
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C. LEWIS

MAR 2 6 2010

EXAMINER

## **COVER LETTER**

CO: Registration Section Division of Corporations	
SUBJECT: JLW Property 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:	
Jack Walker Name of Person	
JLW Property Services, LLC Firm Company	
954 Crest Dr. E Address	
Jackson ville FL 3221  City/State and Zip Code	
Jualker 0001 & Comcast, Net E-mail address: (to be used for future annual report notification)	
or further information concerning this matter, please call:	
Jack Walker at (904) 716-5326 Name of Person Area Code & Daytime Telephone Number	
nclosed is a check for the following amount:	
\$25.00 Filing Fee Certificate of Status  Certificate of Status  Certificate of Status  Certified Copy (additional copy is enclosed)  \$60.00 Filing Fee, Certified Copy (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

2010 MAR 25 PM 4 21

JLW Property Services, LLC SECRETARY OF STAT	E n a
(Name of the Limited Liability Company as it now appears on our records) LAHASSEE, FLORI (A Florida Limited Liability Company)	U.A.
The Articles of Organization for this Limited Liability Company were filed on March 17, 2010 and assigned Florida document number 1000030082.	
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 abbrevi- "L.L.C."	 ation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	
(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 registered agent and/or the new registered office address here:	_ _ new
Name of New Registered Agent:	
New Registered Office Address:	
Enter Florida street address	_
, 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 a accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document i	ınd

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	•	Address	Type of Action
mgrm	Moniea t	n. Walker	954 Crest Dr. E Jacksonville	☐ Add  32221
		-		Add Remove
				Add Remove
	-			Add Remove
	<u> </u>			Add Remove
				AddRemove
D. If amen	nding any other inf	ormation, enter change	(s) here: (Attach additional sheets,	if necessary.)
<u></u>				
				201
Dated	March	Signature of a member of	Dalker Con	ZOIO MAR 25 PM SECRETARY OF STALLAHASSEE.FI
		Jack L W	Valker Tr. r printed name of signee	PM & 21 SEE. FLORIDA
			Page 2 of 2	RIDE RIDE

Filing Fee: \$25.00