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FLORIDA DEPARTMENT OF STATE Division of Corporations

August 31, 2016

B.PAUL KATZ LAW OFFICES OF KATZ & GREEN 1 FLORIDA PARK DRIVE SOUTH ATRIUM STE PALM COAST, FL 32137

SUBJECT: JODA LLC

Ref. Number: L10000037816

We have received your document for JODA LLC and your check(s) totaling \$55.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You failed to make the correction(s) requested in our previous letter.

Amendments to articles of organization of a Florida limited liability company must comply with section 605.0202, Florida Statutes. For your convenience, we are enclosing the appropriate form and instructions.

IF WANT TO USE YOUR FORM PLEASE REFERENCE 605.0202 ON FORM

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) 245-6051.

Shelia H Young Regulatory Specialist II

Letter Number: 516A00016541

www.sunbiz.org

Division of Corporations - P.O. BOX 6327 - Tallahassee, Florida 32314



Law Offices of

KATZ & GREEN

B. Paul Katz Jeffrey K. Green Atrium Suite
B. Paul Katz Professional Center
1 Florida Park Drive South
Palm Coast, Fl. 32137
(386) 446-4469
Fax (386) 446-0644

August 1, 2016

15 AUG -4 AMIL: 33

SENT VIA UPS SECOND DAY

Florida Department of State Registration Section Division of Corporations 2661 Executive Center Circle Tallahassee, FL 32301

RE: JODA, LLC

Dear Sir/Madam:

The enclosed Amended Articles of Organization of Joda, LLC and fee are submitted for filing. Please return all correspondence concerning this matter to the following:

B. Paul Katz Law Offices of Katz & Green 1 Florida Park Drive South Atrium Suite Palm Coast, FL 32137

The sole member and manager of this LLC was Donna Hoppock. Donna

Hoppock died, and her estate is being administered in Flagler County. Her personal representative is David Hoppock. We are enclosing a certified copy of his Letters of Administration that authorize him to act in the stead of Donna Hoppock, and thus execute the enclosed Amended Articles of Organization for JODA, LLC.

For further information concerning this matter, please call B. Paul Katz at 386-446-4469. Enclosed is a check for the following amounts: \$55.00 filing fees and certified copy (additional copy is enclosed).

 \cap / κ

Ď. Paul Katz

erely.

Enclosures

16 AUS -4 AH 11: 33

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

| (Name of the Limit | JODA, ed Ulability Comma (A Florida Limited I | ny as it now appears on | our records.) | | |
|--|---|---------------------------------|--------------------------|---------------------|-----------------|
| The Articles of Organization for this Limited L Florida document numberL1000003783 | | were filed onApr | ril 8, 2010 | and assigned | |
| This amendment is submitted to amend the following | owing: | | | | |
| A. If amending name, enter the new name o | f the limited llab | ility company here: | | | |
| N/A | | | • | | |
| The new name must be distinguishable and contain the v | vords "Limited Liabi | lity Company," the design | nation "LLC" or the at | breviation "L.L.C." | |
| Enter new principal offices address, if applicable: | | N/a | | - For | |
| (Principal office address MUST BE A STREET ADDRESS) | | N/A | | 57 | , |
| | | | | 5 5 | 7 |
| | | | , | 1 000 | : مر |
| Enter new mailing address, if applicable: | | _N/A | | = | |
| (Mailing address MAY BE A POST OFFICE | <u>BOX)</u> | | | | \ |
| | | | | <u> </u> | |
| B. If amending the registered agent and registered agent and/or the new registered or | | | ur records, <u>enter</u> | the name of the new | |
| Name of New Registered Agent: | B, Paul | Katz | | | |
| New Registered Office Address: | <u>Atrium s</u> | Suite, 1 Flori Enter Florida | da Park Dri | ve South | |
| | Palm Coa | | , Florida | 32137 | अ ं हुई। |
| | | City | | Zip Cade | |
| New Registered Agent's Signature, if changing | Registered Agent: | • | | | |
| I hereby accept the appointment as registere provisions of all statutes relative to the prop | | | | | |

If Changing Registered Agent, Signature of New Registered Agent

accept the obligations of my position as registered agent as provided for in Chapter 605, 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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

| <u>Title</u> | <u>Name</u> | Address | Type of Action |
|--------------|---------------------------------------|------------------------|----------------|
| MGR | DONNA HOPPOCK | 47 BAY SPRING PLACE | □ Add |
| | | PALM COAST, PL 32164 | ▼ Remove |
| | | | Change |
| MGR | DAVID HOPPOCK | 1362 TALBOT AVENUE | Ā Add |
| | | JACKSONVILLE, FL 32205 | Remove |
| | | | Change |
| | | | O Add |
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| fecti | ve date, if other than the date of filing: (optional) ctive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to | |
| ote: | If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be | o 605.0207 (. : Listed as th |
| ocum | ant's effective date on the Department of State's records. | |
| rec | ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the e | arliar of |
| The | 90th day after the record is filed. | arner or. |
| | | |
| ated . | September 19 , 2016 | |
| | David Hospiel | |
| | Signature of a member or authorized representative of a member | _ |
| | - · · · · · · · · · · · · · · · · · · · | |

Page 3 of 3

Filing Fee: \$25.00

IN THE CIRCUIT COURT, IN AND FOR FLAGLER COUNTY, FLORIDA

PROBATE DIVISION FILE NO. 2016 CP 000207

IN RE:

ESTATE OF DONNA LUCILLE HOPPOCK alkla Donna V. Hoppock,

Deceased.

LETTERS OF ADMINISTRATION

TO ALL WHOM IT MAY CONCERN:

WHEREAS, DONNA LUCILLE HOPPOCK a/k/a Donna V. Hoppock, the Deceased, a resident of Flagler County, Florida, died on April 25, 2016, owning assets in the State of Florida; and

WHEREAS, DAVID HOPPOCK has been appointed Personal Representative of Decedent's Estate and has performed all acts prerequisite to issuance of Letters of Administration in the Estate.

NOW, THEREFORE, I, declare DAVID HOPPOCK to be duly qualified under Chapter 33, Florida Statutes to act as Personal Representative of the Estate of DONNA LUCILLE HOPPOCK a/k/a Donna V. Hoppock, Deceased, with full power to administer the Estate according to law, to ask, demand, sue for, recover and receive property of the Decedent; to pay the debts of the Decedent as far as the assets of the Estate will permit and the law directs; and to make distribution of the Estate according to law.

ORDERED on

I HEREBY CERTIFY this to be a true And correct copy of the original GAIL WARSWORTH

CLERK OF COURT

01001115 111005

Conformed copies to:

B. PAUL KATZ, ESQ.

APPOINTMENT IS IN FULL FORCE AND EFFE

(DATE)