

L10000009655

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

T. HAMPTON

SEP 28 2011

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JVLBF FD2, 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:

Penny K. Every

Name of Person

Jeffrey C. Sweet, Esquire

Firm/Company

595 W. Granada Blvd., Suite A

Address

Ormond Beach, FL 32174

City/State and Zip Code

jcspenny@bellsouth.net

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

For further information concerning this matter, please call:

Penny K. Every

Name of Person

at (386) 677-3431

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

FILED

2011 SEP 22 AM 11:27

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

JVLBF FD2, 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 05/07/2010 and assigned
Florida document number L10000049655

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)

Enter new mailing address, if applicable:

(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 new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Laverne B. Fisher

New Registered Office Address:

21660 Overseas Highway

Enter Florida street address

Cudjoe Key

, Florida 33042

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.

Laverne B. Fisher
If Changing Registered Agent, Signature of New Registered Agent

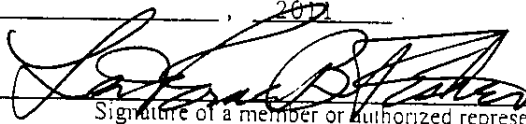
If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Joseph V. Fisher	1200 Ocean Drive Summerland Key, FL 33042	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Laverne B. Fisher	21660 Overseas Highway Cudjoe Key, FL 33042	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	Renee Versaw	204 Lakeview Court Mars, PA 16046	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input 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 _____, 2012



Signature of a member or authorized representative of a member

Laverne B. Fisher

Typed or printed name of signee

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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