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10000087985				
(Requestor's Name) (Address) (Address)	400186749174			
(City/State/Zip/Phone #)	10/19/1001048014 **25.00			
(Document Number) Certified Copies Certificates of Status	10 OC			
Special Instructions to Filing Officer:	FILED OF CORPORATIONS'			
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T. HAMPTON OCT 2 0 2010 EXAMINER

COVER LETTER .

т 0 : '	, Registration Division of C			
SUBJE	د. ۲۰	Jax Com	puter Guys LLC	
50 001			ited Liability Company	
	•			
The en	closed Articles of	of Amendment and fee(s) are sul	bmitted for filing.	
Please	return all corres	pondence concerning this matter	r to the following:	
			Kevin Allan Clark	
			Name of Person	
			Jax Computer Guys	
			Firm/Company	
		575 Oa	kleaf Plantation Pkwy #70	3
			Address	
		C	Drange Park FI, 32065	
			City/State and Zip Code	
		jaxco	omputerguys@gmail.com to be used for future annual report noti	·
For fur	ther information	E-mail address: (concerning this matter, please of		fication)
		-		
		evin Allan Clark	at (<u>904</u>) Area Code & Daytir	662-5521 ne Telephone Number
Enclos	ed is a check for	the following amount:		
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	55.00 Filing Fee & Certified Copy (additional copy is enclose	 \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
			1 ~~ 0-	
	Regi Divis P.O.	LING ADDRESS: stration Section sion of Corporations Box 6327 shassee, FL 32314	STREET/COUR Registration Secti Division of Corpe Clifton Building 2661 Executive C Tallahassee, FL 3	on rations enter Circle

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jax Com	nputer Guys LLC	s on our records.)		
(<u>Name of the Limited Liability (</u> (A Florida Li	mited Liability Company)			28E
The Articles of Organization for this Limited Liability Co	mpany were filed on	08/23/2010	and assigns	
Florida document number L10000087985			AM	DRP(DRP(
This amendment is submitted to amend the following:			AH IT: 38	STATE
A. If amending name, <u>enter the new name of the limite</u>	ed liability company her	<u>e</u> :		- * .*
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Compa	ny," the designation "Ll	LC" or the abbr	eviation
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRE	<u> </u>		<u></u>	<u> </u>
	<u></u>	,	<u></u> .	
Enter new mailing address, if applicable:		<u></u>		
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registe registered agent and/or the new registered office addre		our records, <u>enter th</u>	<u>ne name of t</u>	<u>ne new</u>
Name of New Registered Agent:				<u> </u>
New Registered Office Address:	<u></u>			
	En	ter Florida street addr	ess	
		, Florida	7:01	
	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, <u>enter the title, name, and address of each Manager</u> or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action
MGRM	Kevin Allan Clark	575 Oakleaf Plantation Pkwy #703 Orange Park FI 32065	Add . Remove
			Add Remove
			Add Remove
		· · · · · · · · · · · · · · · · · · ·	Add Remove
			Add Remove
			Add Remove
D. If amendin	ng any other information, enter change(s	s) here: (Attach additional sheets, if necessary.)	
			SECRETAR WASION OF C
* **** 			LED RY OF STATE CORPORATION
Dated	September 27th 2010	lu	TIONS
-	-	authorized representative of a member	
-		vin Allan Clark printed name of signee	
	••	Page 2 of 2	

Filing Fee: \$25.00