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## **COVER LETTER**

TO: Registration Section
Division of Corporations

JT INVESTMENT ENTERPRISES, 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:

JOSEPH J. KULUNAS

Name of Person

FOX ROTHSCHILD LLP

Firm/Company

222 LAKEVIEW AVENUE - #700

Address

WEST PALM BEACH, FL 33401

City/State and Zip Code

jkulunas@foxrothschild.com

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

For further information concerning this matter, please call:

JOSEPH J. KULUNAS

561 804-4402

Name of Person

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

		NTERPRISES, LLC			
(Name of the Limited I	<b>Liability Compan</b> Florida Limited Li	y as it now appears on our reability Company)	ecords.)		
The Articles of Organization for this Limited Lia	bility Company	were filed on 09/15/2010		_ and assig	gned
Florida document number L10000096927	·				
This amendment is submitted to amend the following	wing:				
A. If amending name, enter the new name of	the limited liabi	lity company here:			
The new name must be distinguishable and end with	the words "Limit	ed Liability Company," the de	signation "LLC	or the ab	breviation
"L.L.C."				Pr-3	
Enter new principal offices address, if applica	ble:	5380 North Ocean D	rive 芒米		
(Principal office address MUST BE A STREET	(ADDRESS)	Apt 4 H	30 de 1	<b>8</b>	, <del>T</del>
		Riviera Beach, FL 33	404 🐉		+
			in a	< 0. 2 200	. 3
Enter new mailing address, if applicable:			موت اسم		,,,,,
(Mailing address MAY BE A POST OFFICE B		五,	<u> </u>		
			22		
B. If amending the registered agent and/o registered agent and/or the new registered off			ds, <u>enter the</u>	name of	the new
Name of New Registered Agent:	Joseph J. K	Julunas			
New Registered Office Address:	222 Lakevie	ew Avenue, Suite 700			
		Enter Florida	a street addres	is	
	West Palm	Beach	Florida <u>334</u>	01	
	•	City		Zip Code	
New Registered Agent's Signature, if changing R	egistered 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 Charging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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 = Mar MGRM = M	ager anaging Member		
Title	<u>Name</u>	Address	Type of Action
			Remove S
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If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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ted	
	Signature of a member or authorized representative of a member
	/ 🌱 JOSEPH J. KULUNAS
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

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