L10000 110403

| (Requestor's Name) |
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| (requestors marrie) |
| (Address) |
| |
| (Address) |
| (City/State/Zip/Phone #) |
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| PICK-UP WAIT MAIL |
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| (Business Entity Name) |
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| (Document Number) |
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11 AUG 23 PH TO 54
SECRETARY OF STATE
SECRETARY OF STATE

D. BRUCE
AUG 24 2011
EXAMINER

COVER LETTER

| TO: Registration S Division of Co | ection rporations | | | | |
|-----------------------------------|--|--|--|-----------------------------|------------------------|
| SUBJECT: | J&A Book | Kkeeping, LLC ited Liability Company | | | |
| The enclosed Articles of | Amendment and fee(s) are sul | omitted for filing. | | | |
| Please return all correspo | ondence concerning this matter | to the following: | | | |
| | Jean WI JAB | Name of Person OOKKeeping, LL | <u> </u> | | |
| | 1014 | ESSEX RD Address | | | ٠ |
| | Dayton Larras | a Beach, FL 33 City/State and Zip Code Leterny @ Jabk. ne | 2117 | SECR TALLA | um e gaze |
| | E-mail address: (| to be used for future annual report notificat | | AUG 23 CRETARY AHASSI | printed and the second |
| For further information of | concerning this matter, please of | ali; | | 141 | |
| Jean Bar | sthekmy of Person | at (30S) 213-0 Area Code & Daytime To | 185 elephone Number | STATE STATE | Ö |
| Enclosed is a check for t | he following amount: | | | Ē | |
| \$25.00 Filing Fee | \$30.00 Filing Fee & Certificate of Status | S55.00 Filing Fee & Certified Copy (additional copy is enclosed) | \$60.00 Filing Fee, Certificate of State Certified Copy (additional copy is | <u> </u> | |
| | | | | | |

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

| JEA BOOK | ckeeping | LLC | | | |
|---|---|---------------------------------------|--------------|---------------|-------|
| (<u>Name of the Limited Liability Cor</u> (A Florida Limit | mpany as it now appea ted Liability Company) | rs on our records.) | | | |
| The Articles of Organization for this Limited Liability Comp Florida document number <u>L10000110403</u> . | oany were filed on <u>OC</u> | Hober 21,2010 | and assi | gned | |
| This amendment is submitted to amend the following: | | | | | |
| A. If amending name, enter the new name of the limited | | <u>ге</u> : | | | |
| troverb t | inancial, | LLC | | | |
| The new name must be distinguishable and end with the words "l"L.L.C." | Limited Liability Compa | any," the designation "LL | C" or the al | bbrevia | ation |
| Enter new principal offices address, if applicable: | | | <u> </u> | <u></u> | _ |
| (Principal office address MUST BE A STREET ADDRESS | 5) | | | T. | , |
| | | | 五円 | 3 | |
| | · · · · · · · · · · · · · · · · · · · | | 388 | ယ် | 1 |
| Enter now welling address if annihable. | | | 변설 | | i |
| Enter new mailing address, if applicable: | <u> </u> | | | P.2 | |
| (Mailing address MAY BE A POST OFFICE BOX) | | | <u> </u> | o | |
| | | · · · · · · · · · · · · · · · · · · · | <u>Sur</u> | - | |
| B. If amending the registered agent and/or registered registered agent and/or the new registered office address | | our records, <u>enter the</u> | name of | the 1 | new |
| Name of New Registered Agent: | | | · | | |
| New Registered Office Address: | | | | | |
| | Enter Florida street address | | | | |
| | | , Florida | <u>, , ,</u> | | _ |
| | 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, 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> | | Address | Type of Action |
|--------------|---------------------------------------|------------------------------|--|------------------------------|
| poodent | Jean. W. | Bartheleny | 1014 ESSEX RD DAYTORG BEACH, FL | |
| MERM | Antoin ette | Sharper | 16 Scotts DALE CT Columbia SC 29229 | Add TRemove |
| | | | | Add Remove |
| | | | | Add Remove |
| | | | | Add Remove |
| D. If ame | ending any other informat | ion, enter change(: | s) here: (Attach additional sheets, if necessary.) | Add Remove |
| - | · · · · · · · · · · · · · · · · · · · | | | |
| - - - | | | | II AUG 23 SECRETAR TALLAHASS |
| Dated | August 18, 30 | sthela. ature of a member of | n uthorized representative of a member | PH S 54 |
| | | 4 | | |
| | | lyped or | printed name of signee | |

Page 2 of 2

Filing Fee: \$25.00