

L10000115534

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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MAIL

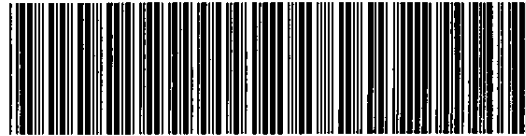
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JAN 10 PM 12:31

T. HAMPTON
JAN 11 2011
EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JTM, 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:

MICHAEL MARINO
Name of Person

JTM, LLC
Firm/Company

1350 JEWEL BOX AVE
Address

NAPLES, FL 34102
City/State and Zip Code

jayacohen@comcast.net
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JAY A COHEN at (603) 625-6051
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

See next
page to
return



FLORIDA DEPARTMENT OF STATE
Division of Corporations

RECEIVED

11 JAN 10 PM 4:00

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

December 21, 2010

MICHAEL MARINO
JTM, LLC
1350 JEWEL BOX AVE
NAPLES, FL 34102

***** 2ND MAILING *****

SUBJECT: JTM, LLC
Ref. Number: L10000115534

We have received your document for JTM, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

You must insert the letters "MGRM" in the block above the name and address of each managing member and/or the letters "MGR" in the block above the name and address of each manager listed.

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) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 210A00028356

Jay Cohen
633 Second Street
Manchester, NH
03102

Spoke with Mr. Cohen
Please return to address
Listed above.



FLORIDA DEPARTMENT OF STATE
Division of Corporations

December 7, 2010

MICHAEL MARINO
1350 JEWEL BOX AVE
NAPLES, FL 34102

SUBJECT: JTM, LLC
Ref. Number: L10000115534

We have received your document for JTM, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

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If you have any questions concerning the filing of your document, please call (850) 245-6855.

Tammy Hampton
Regulatory Specialist II

Letter Number: 210A00028356

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
11 JAN 10 PM 12:01

JTM, 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 NOVEMBER 5, 2010 and assigned
Florida document number L10000115534.

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 "L.L.C."

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:

New Registered Office Address:

Enter Florida street address

Florida

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>	<u>Address</u>	<u>Type of Action</u>
mgrm Mr.	Thomas P. Maddox	76 Joppa Hill Rd. Bedford NH 03110	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
mgrm Mr.	JAY A. Cohen	22 Quincy Dr. Bedford NH 03110	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated _____



Signature of a member or authorized representative of a member

JAY A. COHEN

Typed or printed name of signee

FILED
11 JAN 10 PM 12:31
SECRETARY OF STATE
DIVISION OF CORPORATIONS