

L10000121992

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400262246974

08/04/14--01018--023 **30.00

14 AUG -4 PM 4:14
CALIFORNIA
RECEIVED

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **JAYD 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:

CRAIG VAN DE WEG

Name of Person

JAYD ENTERPRISES, LLC

Firm/Company

8080 ULMERTON RD #A-1

Address

LARGO, FL 33771

City/State and Zip Code

CRAIGVANDY@GMAIL.COM

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

For further information concerning this matter, please call:

CRAIG VAN DE WEG

Name of Person

at (**727**) **201-1356**

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**

JAYD ENTERPRISES, 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 11/24/2010 and assigned
Florida document number L10000121992.

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)

8080 ULMERTON RD

SUITE A-1

LARGO, FL 33771

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8080 ULMERTON RD

SUITE A-1

LARGO, FL 33771

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:

CRAIG VAN DE WEG

New Registered Office Address:

501 HABEN BLVD #505

Enter Florida street address

PALMETTO

Florida

City

34221

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 605, 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.

Craig Van De Weg
If Changing Registered Agent, Signature of New Registered Agent

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

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	WALKER, WENDY S	1 BEACH DRIVE SE, #2114	<input type="checkbox"/> Add
		ST PETERSBURG, FL 33701	<input checked="" type="checkbox"/> Remove
MGRM	DAVIS, DANIEL P	775 116TH AVE	<input type="checkbox"/> Add
		TREASURE ISLAND, FL 33706	<input checked="" type="checkbox"/> Remove
MGRM	VAN DE WEG, CRAIG	501 HABEN BLVD #505	<input checked="" type="checkbox"/> Add
		PALMETTO, FL 34221	<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.)*

**PLEASE REMOVE WENDY S. WALKER AS THE REGISTERED
AGENT AND REPLACE WITH CRAIG VAN DE WEG.**

E. Effective date, if other than the date of filing: _____ **(optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated **JULY 29**, **2014**



Signature of a member or authorized representative of a member

DANIEL P DAVIS

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

16 AUG - 4 PM 11
RECEIVED
FBI