## #/ 1000/23/35

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	(Address)			
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	(City/State/Zip/Phone #)			
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(Document Number)				
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EXAMINER IAN 17 2012

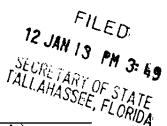
## . COVER LETTER-

TO: ^ Registration S Division of Co			<sub>p</sub> i (	A.
SUBJECT:	JLJ Art	Holdings, LLC		
		ited Liability Company		-
The enclosed Articles of	of Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	condence concerning this matter	to the following:		
		Marc R. Gaylord		_
		Name of Person		
		/larc R. Gaylord, P.A.		
		Firm/Company		
		11700 SE Dixie Hwy.		
		Address		_
		obe Sound, FL 33455	5	
		City/State and Zip Code		<u> </u>
	rpritc E-mail address: (	hard@jfohomestead.o	com ort notification)	_
For further information	concerning this matter, please of	call:		
He	eather Adams	at ( 772 )	545-7740	
Name	of Person	Area Code &	Daytime Telephone Num	ber
Enclosed is a check for	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is e	Certifi enclosed) Certifi	Filing Fee, cate of Status & led Copy onal copy is enclosed)
	LING ADDRESS: tration Section	STREET/0 Registration	COURIER ADDRESS:	
Divis	ion of Corporations Box 6327		Corporations	

Tallahassee, FL 32314

2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



	JLJ Art Hole	dings, LLC		FLORIDA
(Name of the Limite	d Liability Compa A Florida Limited I	ny as it now appea Liability Company)	rs on our records.)	~~~
The Articles of Organization for this Limited I	Liability Company	were filed on	11/30/2010	and assigned
Florida document numberL1000012	23135			
This amendment is submitted to amend the fol	llowing:			
A. If amending name, enter the new name	of the limited liab	ility company he	<u>re</u> :	
The new name must be distinguishable and end w "L.L.C."	rith the words "Limi	ited Liability Comp	any," the designation "L	LC" or the abbreviation
Enter new principal offices address, if appli	Adrian M. Fo	oley, Jr., c/o Conne	ell Foley LLP	
(Principal office address MUST BE A STRE	ET ADDRESS)	85 Livingstor	n Avenue	
		Roseland, N	J 07068	
Enter new mailing address, if applicable:	same as abo	ve		
(Mailing address MAY BE A POST OFFICE	E BOX)			
B. If amending the registered agent and registered agent and/or the new registered of			our records, <u>enter t</u>	he name of the ne
Name of New Registered Agent:	Marc R. Ga	ylord, Esq.		
New Registered Office Address:	11700 SE E		nter Florida street add	wass
			uer rioriaa sireel ada.	
	Н	obe Sound	, Florida	33455
		Citv		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, thereby 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
MGRM	James L. Johnson	11450 SE Dixie Hwy. Suite 202 Hobe Sound, FL 33455	Add Remove 
MGR_	Henry Slack	P.O. Box 28 Peapack, NJ 07977	✓ Add Remove
MGR_	James Kempner	30 Rockefeller Plaza, 62nd Floor New York, NY 10020	Add Remove
			Add Remove
			∏Add Remove
			Add Remove
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	
_			<del></del>
_		1	<del>-</del>
Dated	January 10 ,	2012	
	Signature of a n	nember or authorized representative of a member	
		Marc R. Gaylord, Esq. Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00