## 11000009799

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SECRETARY OF STATE TALLAHASSEE, FLORIDA

T. CLINE

JUL 1 2 2011

**EXAMINER** 

## **COVER LETTER**

TO: Registration S Division of Co				
SUBJECT:	JOPAG I	nuestments, ited Liability Company	LLC	
	Name of Limi	ned Liability Company		
The enclosed Articles o	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
	Lisa	Lanza		
	Melis		P.A.	
	104 Cr	Firm/Company Candon Blvd.	Suite	420
	Key Bisco	Address		
	lana	eyne FL 3314  City/State and Zip Code  Za (aw  a) a o   - (  to be used for future annual report notificati	ð M	201 SEC
For further information	concerning this matter, please c	•		章
LISA	Lanza	at 305) 36 1-09		ARY OF
Name	of Person	Area Code & Daytime Te	elephone Number	FLORIDE 3
Enclosed is a check for	the following amount:			, F. P
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified	e of Status &
Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Center Tallahassee, FL 32301	ons r Circle	

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

JOPAG Investments, 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 61/24/2011 and assigned Florida document number L11000009799 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 City

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 **Type of Action Address Title** <u>Name</u> MGL Crandon Blud. Add Remove ☐ Add Remove Crandon Blud. ☐ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) July Signature of a member or authorized representative of a member Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00