# L11000045532

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## **COVER LETTER**

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: JoboRtuni8t, 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:
Chris Mors Kov Name of Person
Firm/Company
2345 Deer Creek Blvd.
St. Cloud, FL 34772 City/State and Zip Code
Chris. Norskova Johor tunist. Com E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mavelys SoleR at (407) 556 -55/3 Name of Person Area Code & Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee \( \sum \) \$30.00 Filing Fee \( \text{Certificate of Status} \) \( \sum \) \$55.00 Filing Fee \( \text{Certificate of Status} \) \( \text{Certificate of Status} \) \( \text{Certificate of Status} \)

### **MAILING ADDRESS:**

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

### STREET/COURIER ADDRESS:

Certified Copy

(additional copy is enclosed)

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

(additional copy is enclosed)

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jobortun St. LLC	ony as it now appears on our records.)
(A Florida Limited )	ny as it now appears on our records. Liability Company)
The Articles of Organization for this Limited Liability Company	were filed on April 18, 2011 and assigned
Florida document number <u>L 11000045532</u> .	
This amendment is submitted to amend the following:	ASSET 2
A. If amending name, enter the new name of the limited liab	oility company here:
The new name must be distinguishable and end with the words "Lim"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRESS)	2345 Deer Creek Blvd. St. Cloud FL 34772
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2345 Deer Creek Blud.
	St. Cloud, FC 39712
B. If amending the registered agent and/or registered of	,
registered agent and/or the new registered office address her	<u>e</u> :
Name of Naw Pagistaned Agents	
Name of New Registered Agent:	
New Registered Office Address: 2345	Deer Creek Blul
	Enter Florida street address

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 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** Title Address Name Alex Mandernack MGRM 13303 Wispering Palms Uny \$1/03 \ Add ORlando, FL 32828 Remove Tim Unrue 13303 Wispering Palms Way Add MGRM Ap+# 103 Remove Onlando, FL 32828 Remove Remove Remove Add Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Updated address: Chris Norskov
2345 Deer Creek Blud, St. Cloud, FL 34772
Update Address: Mavelyn SoleR
2345 Deer Greek Blud, St. Cloud, FL 34772
Dated October 14, 2013.
Signature of a member or authorized representative of a member
Chris Norskov
Typed or printed name of signee
Page 3 of 3
Filing Fee: \$25.00

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TALLAHASSEE, FLORIDA