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SECRETARY OF STATE

T. CLINE
MAY - 4 2011
EXAMINER

COVER LETTER

TO: Registration Se Division of Con				
SUBJECT:	JP3 1	LLC		
		ed Liability Company		
	Amendment and fee(s) are sub ondence concerning this matter	•		
		Jack R. Segler		
		Name of Person		
J&P Storage Company, LLC				
		Firm/Company		
		PO Box 15903 Address		
Panama City, FL 32406			2011 RAY - 2 SECRETARY TALLAHASSE	
		City/State and Zip Code	AH AH AH	.40
	F-mail address: (t	egler77@gmail.com o be used for future annual report notifi	TARY ASSE	_
For further information of	concerning this matter, please co		814-9406 Display	
Ja	ick R. Segler	at (_ 850)	814-9406 BA	•
Name o	of Person	Area Code & Daytimo	Telephone Number	
Enclosed is a check for t	the following amount:			
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)	
	JNG ADDRESS: ration Section	STREET/COURI Registration Section		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	IP3 LLC		
(<u>Name of the Limited Liability (</u> (A Florida Li	Company as it now appears on mited Liability Company)	our records.)	
The Articles of Organization for this Limited Liability Co. Florida document number L11000047361	mpany were filed onA	oril 20, 2011 · _ and a	assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limite	ed liability company here:		
The new name must be distinguishable and end with the word "L.L.C."	s "Limited Liability Company."	the designation "LLC" or the	e abbreviation
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRE	ESS)	Z S S	=
Enter new mailing address, if applicable:		TARY I ASSEE	1 T
(Mailing address MAY BE A POST OFFICE BOX)			K
B. If amending the registered agent and/or registeredsistered agent and/or the new registered office addresses.	red office address on our	DE I	e of the nev
Name of New Registered Agent:			
New Registered Office Address:	Enter F	Florida street address	
		. Florida	
	City	, Florida Zip Co	ode

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>Address</u> **Type of Action** <u>Name</u> <u>Title</u> ULRU Jack R. Segler PO Box 15655 ☐ Add Panama City, FL 32406 Remove ⊓nn B. Segler PO Box 15655. ☐ Add ✓ Remove Panama City, FL 32406 J&P Storage Company, LL □□R□ PO Box 15903 ✓ Add Panama City, FL 32406. Remove Remove Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) 4/28 . 2011 Dated Signature of a morbber or authorized representative of a member Typed or printed name of signee

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Filing Fee: \$25.00