L11000089163

300230982693

04/25/12--01012--019 **25.00

FILED
2012 APR 25 PM 3:00
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

COVER LETTER

TO: **Registration Section**
        Division of Corporations

SUBJECT: _TL Jupiter 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:

Dawn Rysk
_____
Name of Person

TL Jupiter
_____
Firm/Company

1 South Ocean Blvd 304
_____
Address

Boca Raton Fl 33432
_____
City/State and Zip Code

Dawn @ tropicalaser.com
_____
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Dawn Rysk _____ at (_754_) _366 - 3493_
_____   _____
Name of Person   Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☑ $25.00 Filing Fee   ☐ $30.00 Filing Fee & ·   ☐ $55.00 Filing Fee &   ☐ $60.00 Filing Fee,
                        Certificate of Status   · Certified Copy   Certificate of Status &
                                                 (additional copy is enclosed)   Certified Copy .
                                                                         (additional copy is enclosed)

MAILING ADDRESS: **STREET/COURIER ADDRESS:**
Registration Section   Registration Section
Division of Corporations   Division of Corporations
P.O. Box 6327   Clifton Building
Tallahassee, FL 32314   2661 Executive Center Circle
                                  Tallahassee, FL 32301

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

TL Jupiter 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 __8 1 2011__ and assigned

Florida document number __L11000089163__ .

This amendment is submitted to amend the following:

A. If amending name, <u>enter the new name of the limited liability company here</u>:

_____

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, <u>enter the name of the new registered agent and/or the new registered office address here</u>:

<u>Name of New Registered Agent:</u>   _____

<u>New Registered Office Address:</u>   _____

Enter Florida street address

_____ **, Florida** _____

City   Zip Code

<u>New Registered Agent's Signature, if changing Registered Agent</u>:

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, <u>Signature of New Registered Agent</u>

Page 1 of 2

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:
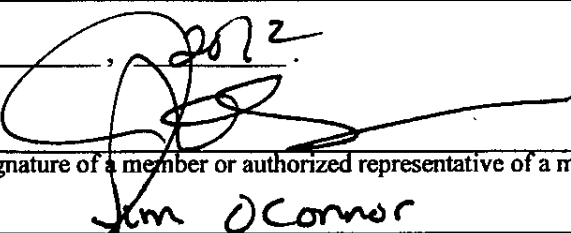
MGR = Manager
MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	JJKT Enterprises	1. South Ocean Blvd 306 Boca Raton FL 33432	☐ Add ☒ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove
_____	_____	_____	☐ Add ☐ Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated __3/1__, __2012__.

_____
Signature of a member or authorized representative of a member

Kim O'Connor
Typed or printed name of signee

FILED 2012 APR 25 PM 3:58

Page 2 of 2

Filing Fee: $25.00