Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H20000444886 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PETERSON & MYERS PA

Account Number : 120080000078 Phone

; (863)294-3360

Fax Number : (863)299-5498

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Fundl Addmoss:	freyes@petersonmyers.com
Email Addracc:	Heleschereragmin and and a

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JB REALTY PARTNERS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

COVER LETTER

TO:	Registration See Division of Carp		5	.
	/B Realty Pa	irinors, LLC		
SUBJI	ECT:	Name of Umli	ed Liability Company	
The en	closed Articles of A	Amendment and fee(s) are subm	nitted for filing.	
		dence concerning this matter (
		Craig Hill	Namu of Person	
		Peterson & Myers P.A.	Clrm/Company	···
		225 East Lemon Street #30	O Address	
		Lakeland, FL 33801	City/State and Zip Code	
		freyes@petersonmyers.com E-mail address: (t	o be used for future annual report notif	(Icalion)
For fu	irther information c	procerning this matter, please ca	all:	
Flor I	Reyes Neme o	ſ Person	at (<u>863</u>) <u>683-6511</u> Area Code Daytim	a Telephone Number
Enclo	sed is a check for th	ne following amount:		
≣ \$	25.00 Filing Fee	□ \$30.00 Filing Pec & Certificate of Status	☐ \$55,00 Filing Fee & Certified Copy (additional copy is enclosed)	■ \$60,00 Piling Pee, Certificate of Status & Certified Copy (additional copy is enclosed)
	Mailing Address Registration S Division of C P.O. Box 632 Tallahassee,	Section Corporations 27	Street Address: Registration Se Division of Co The Centre of T 2415 N. Monro Tallahassee, FI	rporations Fallahassee le Street, Suite 810

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

•	Partners, LLC	
(Name of the Limited Liability Comme (A Florida Limited	ony as it now annears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Plorida document number L11000090976	were filed on August 8, 2011	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and contoin the words "Limited Linb	lity Company," the designation "LLC" o	3
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		Sic P II
Enter new mailing address, if applicable:		0
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	nddress on our records, <u>enter t</u>	he name of the now registered
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	. Flo	rida
	Clty	Zip Code
New Registered Agent's Signature, if changing Registered Agen		
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complete	gree to act in this capacity. I fur te performance of my duties, and	ther agree to comply with the d I am familiar with and

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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Austin T. Jones	3929 Aero Place	□Add
		Lakeland FL 33811	■ Remove
·			Change
	·		□Add
			□Remova
			□ bbA □
			□Remove
			Change
			DAdd
			Change
			□Add
			□Remove
			Change
	,		□Remove
		·	☐ Change

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amendi	ng any other information, enter change(s) here: (Attach additional sheets, if necessary.)
-	
—	
Note: If t	date, if other than the date of filing: (optional) we date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as a seffective date on the Department of State's records.
record sp d is filed.	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
Dated	2020
/aicu	The William Co
	Signature of a member or authorized representative of a member
	Shawn W. Jones, as its Manager Typed or printed name of signee

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Filing Fee: \$25.00