

L11000118466

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP ☐ WAIT ☐ MAIL

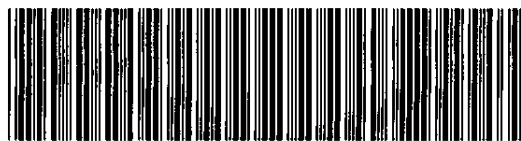
(Business Entity Name)

(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

Office Use Only



500212213335

11/03/11--01021--002 \*\*25.00

FILED  
2011 NOV -3 PM 12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

T. HAMPTON

NOV - 4 2011

EXAMINER

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** CALM JA, 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:

COURTNEY A. L. MILLER

Name of Person

CALM JA, LLC.

Firm/Company

535 REDDICKS CIRCLE

Address

WINTER HAVEN, FLORIDA 33884

City/State and Zip Code

MTGEMAKER@MSN.COM

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

COURTNEY A. L. MILLER

Name of Person

at ( 954 )

608-9095

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &  
Certificate of Status

☐ \$55.00 Filing Fee &  
Certified Copy  
(additional copy is enclosed)

☐ \$60.00 Filing Fee,  
Certificate of Status &  
Certified Copy  
(additional copy is enclosed)

**MAILING ADDRESS:**

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

**STREET/COURIER ADDRESS:**

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

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

**FILED**

2011 NOV -3 PM 12:14

**CALM JA, LLC.**

(Name of the Limited Liability Company as it now appears on our records)  
(A Florida Limited Liability Company)

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on OCTOBER 17, 2011 and assigned  
Florida document number L11000118466.

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)**

535 REDDICKS CIRCLE

WINTER HAVEN, FLORIDA 33884

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

535 REDDICKS CIRCLE

WINTER HAVEN, FLORIDA 33884

**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*

Florida

*City*

*Zip Code*

**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>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
<u>MGRM</u>	<u>COURTNEY A. MILLER</u>	<u>138 CLOVERDALE ROAD</u> <u>WINTER HAVEN, FLORIDA 33884</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>Clarence A. Miller Snr.</u>	<u>138 Cloverdale Road</u> <u>Winter Haven, FL 33884</u>	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
<u>MGRM</u>	<u>COURTNEY A. L. MILLER</u>	<u>535 REDDICKS CIRCLE</u> <u>WINTER HAVEN, FLORIDA 33884</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGRM</u>	<u>Clarence A. L. Miller Snr.</u>	<u>535 REDDICKS CIRCLE</u> <u>WINTER HAVEN, FLORIDA 33884</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
<u>MGR</u>	<u>CLAUDINE P. CHANNER</u>	<u>4381 NW 35 Terrace</u> <u>Lauderdale Lakes, Florida 33309</u>	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated OCTOBER 31, 2011

Signature of a member or authorized representative of a member

COURTNEY A. L. MILLER

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00

FILED  
2011 NOV -3 PM12:13  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA