

**L11000120298**

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

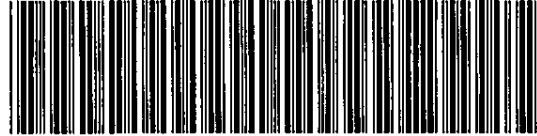
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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**T WASHINGTON**

**DEC 15 2016**

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Justana, 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:

Andrew M. Reed

\_\_\_\_\_  
Name of Person

Reed Mawhinney & Link, PLLC

\_\_\_\_\_  
Firm/Company

1611 Harden Blvd.

\_\_\_\_\_  
Address

Lakeland, FL 33803

\_\_\_\_\_  
City/State and Zip Code

andy@polklawyer.com

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

For further information concerning this matter, please call:

Andrew M. Reed

863 687-1771  
at ( )

\_\_\_\_\_  
Name of Person

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**

Justana 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 October 20, 2011 and assigned Florida document number L11000120298.

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 contain 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)**

4213 Misty Way

Auburndale, FL 33823

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

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

4213 Misty Way

Auburndale, FL 33823

**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:

Reed Mawhinney & Link, PLLC

New Registered Office Address:

1611 Harden Blvd.

*Enter Florida street address*

Lakeland

*City*

, Florida 33803

*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 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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Justin Werner	4213 Misty Way	<input checked="" type="checkbox"/> Add
		Auburndale, FL 33823	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	Kris Werner	710 Butternut Pl.	<input type="checkbox"/> Add
		Lakeland, FL 33813	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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16 DEC 14 AM 10:50  
DEPT OF STATE  
STATE HOUSE FLORIDA

16 DEC 14 AM 10:50

(If an effective 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 (3)(b)

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:

(b) The 90th day after the record is filed.

Dated December 13, 2016

Just We  
Signature of a member

Signature of a member or authorized representative of a member

Justin Werner, Personal Representative of the Estate of Kris Werner

Typed or printed name of signee

IN THE CIRCUIT COURT OF THE 10<sup>TH</sup> JUDICIAL CIRCUIT  
FOR POLK COUNTY, FLORIDA

PROBATE DIVISION

IN RE: THE ESTATE OF

KRIS ALAN WERNER

File No. 2016CP-003013-0000-XX

Deceased.

LETTERS OF ADMINISTRATION  
(single personal representative)

TO ALL WHOM IT MAY CONCERN

WHEREAS, Kris Alan Werner, a resident of Polk County, Florida, died on September 27, 2016, owning assets in the State of Florida, and

WHEREAS, Justin Werner has been appointed personal representative of the estate of the decedent and has performed all acts prerequisite to issuance of Letters of Administration in the estate,

NOW, THEREFORE, I, the undersigned circuit judge, declare Justin Werner duly qualified under the laws of the State of Florida to act as personal representative of the estate of Kris Alan Werner, deceased, with full power to administer the estate according to law; to ask, demand, sue for, recover and receive the property of the decedent; to pay the debts of the decedent as far as the assets of the estate will permit and the law directs; and to make distribution of the estate according to law.

ORDERED on November 21, 2016.

*Ellen Masters*

Ellen S. Masters  
Circuit Judge

Copy to:

Andrew M. Reed, Esq.  
Justin Werner