L11000131317

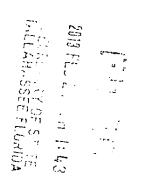
(Requestor's Name)		
(Address)		
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(City/State/Zip/Phone #)		
PICK-UP WAIT - MAIL		
(Business Entity Name)		
(Document Number)		
Certified Copies Certificates of Status		
Special Instructions to Filing Officer:		





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COVER LETTER,

TO: Registration Section
Division of Corporations

SUBJECT: J Ryans on Clark 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:

Michael Friedman

Name of Person

Firm Company

8389 S. Tamiami Trail

Address

Sarasota, FL 34238

City/State and Zip Code

msf2304smile@yahoo.com

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

For further information concerning this matter, please call:

Michael Friedman

ູ 201、870-3093

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

J Ryans on Clark LLC		
(Name of the Limited Liability Company (A Florida Limited Lia	as it now appears on our record	<u>s.</u>)
(7) Torrida Marieco Marie	ionity Company)	
The Articles of Organization for this Limited Liability Company w	vere filed on 11/17/2011	and assigned
Florida document number L11000131317		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabili	ity company here:	
A. If amending traine, enter the new name of the number habin	ny company nere.	
The new name must be distinguishable and end with the words "Limite	411.400.00	4' - 67 1 O2' - 4b - Lb - i 4'
The new name must be distinguishable and end with the words 1.5miles "L.L.C."	d Liabiniy Company, the designa	
		2013
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)	· · · · · · · · · · · · · · · · · · ·	Use the same
		() = -
Enter new mailing address, if applicable:	8389 S 7AM Sarasotu, FL	<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)	8 50 9 S /AM	IAMEN 5
	Sarasotu.FL	34238
B. If amending the registered agent and/or registered offic		nter the name of the new
registered agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:		
rew Registered Office Address.	New Registered Office Address. Enter Florida street address	
	En a maria	do
	City Flori	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, <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>	Address	Type of Action
MGRM	Demitri Goletsos	360 Marin Blvd	Add
		Jersey City, NJ 07302	Remove
MGRM	Michael Friedman	8389 S. Tamiami Trail	
		Sarasota, FL 34238	Remove
			Add
			Remove
			Add
		EFLURIO,	Remove
		. 0,1	Add
			Remove
			Add
			Remove

D. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.) .
Dated	2/15/15
	Myst
	Signature of a member or authorized representative of a member M. chae / S. Friedon

Page 3 of 3

Filing Fee: \$25.00