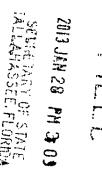
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COVER LETTER

TO:

Registration Section **Division of Corporations**

Marv's House of Jerky 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:

Marvin DeJarnette	
Name of Person	
Firm/Company	
702 SE Sweetbay Ave	
Address	
Port St Lucie, FI 34983	2013 JAN
City/State and Zip Code	- 85 2
marvvindejarnette@bellsouth.net	
E-mail address: (to be used for future annual report notification)	
cerning this matter, please call:	2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0

For further information con-

Marvin DeJarnette

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

Marv's House of Jerky LL0					
(<u>Name of the Limited</u> (A	Liability Compa Florida Limited I	ny as it now appears on our liability Company)	records.)		
The Articles of Organization for this Limited L	iability Company	were filed on 01/05/2012	2	and ass	signed
Florida document number L12000001982					
This amendment is submitted to amend the foll	owing:				
A. If amending name, enter the new name o	f the limited liab	ility company here:			
Marv's Jerky LLC			•		-
The new name must be distinguishable and end wi "L.L.C."	th the words "Limi	ted Liability Company," the d	esignation "Ll	:	abbreviation
Enter new principal offices address, if applic	able:	702 SE Sweetbay A	ve 🚉		41 g
(Principal office address MUST BE A STREE	ET ADDRESS)	Port St Lucie, FI 349	183 <u>186</u> 2	ි න	1
			; '⊆ 71		
Enter new mailing address, if applicable:		702 SE Sweetbay A	ve S	₩ 0s	***************************************
(Mailing address MAY BE A POST OFFICE BOX)		Port St Lucie, FI 349	83		_
B. If amending the registered agent and/ registered agent and/or the new registered of	ffice address her	<u>e</u> :	rds, <u>enter th</u>	e name o	of the nev
Name of New Registered Agent:	Marvin DeJ	larnette		<u></u>	
New Registered Office Address:	702 SE Sw	eetbay Ave			
		Enter Floria	la street addre	!SS	
	Port St Luc	,	Florida 349	183	
		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

Title	<u>Name</u>	Address	Type of Action
MGR	Marvin DeJarnette	702 SE Sweetbay Ave	Add
		Port St Lucie, FI 34983	Remove
		<u> </u>	_
MGR	Cynthia DeJarnette	702 SE Sweetbay Ave	Add
		Port St Lucie, Fl 34983	Remove
MGR	Todd DeJarnette	1401 SW Medina Ave	Add
		Port St Lucie, FI 34983	Remove
			-
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		Cr. Or	MH 28 [
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			_
			Add
			Remove

. If am	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	,
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ted	James 25, 20/3.
	ma /D.
	Signature of a member or authorized representative of a member
	MARUIND ODANGHE
	Typed or printed name of signee
	Page 3 of 3

Filing Fee: \$25.00