120005594

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ry/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

G. MCLEOD

JAN 2 6 2012

EXAMINER



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01/25/12--01015--005 **25.00

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COVER LETTER

			ML 1 LLC	in the second se
·`. Γhe enclosed				
		Name of Lin	nited Liability Company	······································
S	Articles of	Amendment and fee(s) are su	ibmitted for filing.	
Please return	all correspo	ondence concerning this matte	er to the following:	
		a 196 0	Noel Brown	
		•	Name of Person	
		,	NTB Services LLC	
			Firm/Company	
			1090 Knotty Bing Ava	•
			1080 Knotty Pine Ave	
			North Port,FL:34288c3 5	
	COLB:	m + 12 + 17 28 + 18 + 19 + 19 (19 + 19 + 19 + 19 + 19 + 19	City/State and Zip Code किया पुरु	ប់ថ្មី
	15.4.0	Operations:	(to be used for future annual report	notification)
		concerning this matter, please		
or further in	normation c	concerning this matter, please	caii:	
	N	loel Brown	at (941)	429-0506
	Name o	f Person	Area Code & Da	aytime Telephone Number
		•	* ;	·
Enclosed is a	check for th	he following amount:		
√ \$25.00 Fil	ling Fee	\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,
		Certificate of Status	Certified Copy (additional copy is encl	Osed) Certificate of Status & Certified Copy
		•	(additional copy is circ.	(additional copy is enclosed)
		•		
•		22		
MAILING ADDRESS:			URIER ADDRESS:	
		ration Section Section of Corporations	Registration Se Division of Co	ection, page 1
		ox 6327	Clifton Buildir	ng
		issee, FL 32314	Canalisa 6 2661 Executiv	e Center Circle

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	JML 1 LLC			
(<u>Name of the Limited Liabili</u> (A Florida	ty Company as it now appea Limited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability	Company were filed on	01/17/2012	and a	ssigned
Florida document number L1200007594	·			
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the lin	nited liability company he	<u>re</u> :		
The new name must be distinguishable and end with the wo "L.L.C."	ords "Limited Liability Comp	any," the designation "	LLC" or the	e abbreviatio
Enter new principal offices address, if applicable:				
Principal office address MUST BE A STREET ADD	RESS)			
			2	
Enter new mailing address, if applicable:			JAN 25	F (Salesteen)
Mailing address MAY BE A POST OFFICE BOX)			TA A	177
			10: 57 STATE	
B. If amending the registered agent and/or regis			200	of the ne
registered agent and/or the new registered office add	<u>lress here</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
	En	ter Florida street add	tress	
	Cit	, Florida	7in C -	d ₀
	City		Zip Cod	ае

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>	Address	Type of Action
MGR	LAURA GRABER	1331 DARYL DR SARASOTA FL 34232	Add Remove
<u>MGRM</u>	JOSH L GRABER	1331 DARYL DR SARASOTA FL 34232	Add Remove
MGR	JOSH L GRABER	1331 DARYL DR SARASOTA FL 34232	Add Remove
			Add Remove
			Add Remove
· -		· · · · · · · · · · · · · · · · · · ·	Add Remove
D. If amend	ding any other information, enter	change(s) here: (Attach additional sheets, if necessary.)	_
	,		_
			_
Dated	JANUARY 20	2012	
	Signature of a r	nember or authorized representative of a member	
	JOSH	L. GRABER / MGR - JML 1 LLC	
		Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00