

11/16/2012 1:10 PM

((H12000273114 3)))

**COVER LETTER**

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** S&J PROPERTY HOLDINGS, 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:

LAWRENCE W. SMITH

Name of Person

GARY, DYTRYCH & RYAN, P.A.

Firm/Company

701 U.S. HIGHWAY ONE, SUITE 402

Address

NORTH PALM BEACH, FL 33408

City/State and Zip Code

MD@GDR-LAW.COM

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

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

2012 NOV 16 PM 3:32

FILED

For further information concerning this matter, please call:

MICHELLE DEWHURST at 561 844-3700

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

((H12000273114 3)))

((H12000273114 3)))

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

S&J PROPERTY HOLDINGS, 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 April 4, 2012

Florida document number L12000046580

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)

701 U.S. HIGHWAY ONE, SUITE 402

NORTH PALM BEACH, FL 33408

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

701 U.S. HIGHWAY ONE, SUITE 402

NORTH PALM BEACH, FL 33408

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:

LAWRENCE W. SMITH

New Registered Office Address:

701 U.S. HIGHWAY ONE, SUITE 402

*Enter Florida street address*

NORTH PALM BEACH

Florida 33408

*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

((H12000273114 3)))

((H12000273114 3)))

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>
MGRM	SCOTT LIZZA	C/O 660 U.S. HIGHWAY #1, 3RD FLOOR	<input type="checkbox"/> Add
		NORTH PALM BEACH, FL 33408	<input checked="" type="checkbox"/> Remove
MGRM	JOHN STALUPPI	701 U.S. HIGHWAY ONE, SUITE 402	<input checked="" type="checkbox"/> Add
		NORTH PALM BEACH, FL 33408	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED  
2412 NOV 26 PM 3:32  
TALLAHASSEE, FLORIDA  
CLERK ADY

((H12000273114 3)))

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

---


---

---

---

---

Dated \_\_\_\_\_



Signature of a member or authorized representative of a member

JOHN STALUPPI

Typed or printed name of signer

Page 3 of 3

Filing Fee: \$25.00

FILED  
2012 MAY 16 PM 1:32  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

((H12000273114 3)))