L12000046695

(Requ	uestor's Name)	
(Addı	ress)	
(Addı	ress)	<u>.</u>
(City/	/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	iness Entity Nan	ne)
(Doci	ument Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	iling Officer:	
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SICHETARY OF STATE

SECRETARY OF STATE
DIVISION OF CORPORATIO
15 JUN 23 MM 11: 15

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COVER LETTER

TO:	Registration Sec Division of Corp			•	•
CUDID	Jams Produc	ce LLC			
SUBJE	CI:	Name of Limi	ted Liability Company		
The enc	closed Articles of A	Amendment and fee(s) are sub	mitted for filing.		
Please r	return all correspor	ndence concerning this matter	to the following:		
		Justin Rosen, CPA			
			Name of Person		
		Justin Rosen F D S Inc			
		·	Firm/Company	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
		3902 Henderson Blvd Ste 2	208-141		
			Address		
		Tampa FL 33629			
			City/State and Zip Code		
		justin@jrosenfds.com	to be used for future annual re	enart natification	<u></u>
For furt	her information co	oncerning this matter, please ca		sport notification.	,
Justin F	Rosen, CPA		813 288- at ()	-0434	
	Name of	Person	Area Code	Daytime Telepl	hone Number
Enclose	ed is a check for the	e 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)
	Registra Division P.O. Bo	NG ADDRESS: ation Section of Corporations x 6327 ssee, FL 32314	Registration Division on Clifton Bu 2661 Exec	of Corporations	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

15 JUN 23 AM II: 15

Jams Produce LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited Liability Company)

ALLAHASSEE, FLORIDA

he Articles of Organization for this Limited Lorida document number L12000046695	iability Company	were filed on 04/05	and assigned
nis amendment is submitted to amend the fol	lowing:		
If amending name, enter the new name of	of the limited liab	bility company here	:
me company name			
new name must be distinguishable and contain the	words "Limited Liabi	ility Company," the desi	gnation "LLC" or the abbreviation "L.L.C."
ter new principal offices address, if appli	cable:	same principal add	ress
rincipal office address MUST BE A STRE			,
			
ter new mailing address, if applicable:		1451 Clearwater L	argo Road
ailing address MAY BE A POST OFFICE	E ROX)	Largo, FL 33770	
If amending the registered agent and gistered agent and/or the new registered o	office address her	<u>re</u> :	ur records, enter the name of the
Name of New Registered Agent:	Justin Rosen, CPA		
New Registered Office Address:	3908 W Mulle		
		Enter Florida	street address
	Tampa		, Florida 33609
		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 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

FILED SECRETARY OF STATE DIVISION OF CORPORATIONS

□ Change

15 JUN 23 AM II: 15 <u>Title</u> **Name** Address **Type of Action** SECRETARY OF STATE 11998 84th Way NEALL AHASSEE, FLORIDA Nicole M Gargiulo MRGM □ Add Largo FL 33773 Remove ☐ Change MGR Tina Lynn Gargiulo 1451 Clearwater Largo Road **■** Add Largo, FL 33770 ☐ Remove ☐ Change _□ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change ☐ Add ☐ Remove ☐ Change □ Add ☐ Remove

	riease contact tina or just	in Rosen regarding any	questions at the addr	esses
above.				

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	04/11/2015		(N	
ive date, if other than the date ective date is listed, the date must be sp	ecific and cannot be prior to da			
If the date inserted in this block do ent's effective date on the Departm		statutory filing requirem	ents, this date will no	ot be listed
		-		
ord specifies a delayed effe 90th day after the record is		effective time, at 1	.2:01 a.m. on th	
1	2015	_	S S	d
June 1st	, 2015			JUN 23
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Page 3 of 3

Filing Fee: \$25.00