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COVER LETTER

	stration Sec sion of Corp			
OUNTE CT	J.D. GAM	BLING, LLC		
SUBJECT:		Name of Limi	ted Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are subt	nitted for filing.	
Please return	all correspor	idence concerning this matter t	to the following:	
		Loralyn Hutchens		
			Name of Person	•
<u>.</u>		Beytin McLaughlin McLa	ughlin O'Hara Kinman & Bocchi	no, P.A.
			Firm/Company	· .
		1706 East 11th Avenue		2
•			Address	
		Tampa, FL 33605		• •
		Ilh@law-fla.com	City/State and Zip Code	
		E-mail address: (t	o be used for future annual report notif	ication)
For further in	formation co	oncerning this matter, please ca	di:	
Loralyn Huto	chens		813 226-3000	
	Name of	Person		Telephone Number
Enclosed is a	check for the	e following amount:		
\$25.00 Fi	iling 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.D. G	AMBLING, LLC		
(<u>Name of the Limited Lia</u> (A Flo	hility Company as it now apperida Limited Liability Company	ars on our records.)	
The Articles of Organization for this Limited Liabilit	y Company were filed on _	April 5, 2012	and assigned
Florida document number			
This amendment is submitted to amend the following	;		
A. If amending name, enter the new name of the	imited liability company	<u>here</u> :	
J.D. HOLDINGS OF MAITLAND, LLC			
The new name must be distinguishable and contain the words "	Limited Liability Company," the	designation "LLC" or th	e abbreviation "L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET AD	DRESS)		
•			
			•
Enter new mailing address, if applicable:		<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)			
			•
B. If amending the registered agent and/or re registered agent and/or the new registered office a		on our records, <u>ent</u>	er the name of the new
			-
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Fl	orida street address	
		, Florida	
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Benjamin A. Hannah	2708 Gulf Boulevard, Unit 101	
		Indian Rocks Beach, FL 33785	■ Remove
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	September	17. 2018	
ive date, if other than the date fective date is listed, the date must b			ptional)
fective date is listed, the date must be If the date inserted in this blochent's effective date on the Dep	k does not meet the applicabl	late of filing or more than 90 days a e statutory filing requirements,	ofter filing.) Pursuant to 605.4 this date will not be liste
cord specifies a delayed e 90th day after the recor		in effective time, at 12:0	1 a.m. on the earlie
September 14	2018		
<i>'</i>	Weeds Who	ed representative of a member	

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00