## 12000057323

(Requestor's Name)						
(Address)						
(Address)						
(City/State/Zip/Phone #)						
PICK-UP WAIT MAIL						
(Business Entity Name)						
(Document Number)						
Certified Copies Certificates of Status						
Special Instructions to Filing Officer:						
SEP 1 2 2012						
L. SELLERS						
·						

Office Use Only



700239349807

09/10/12--01042--003 \*\*25.00

12 SEP IO PH 1: 01
SECRETARY OF STATE

## **COVER LETTER**

TO:	Registration Sect Division of Corpo			**************************************		<b>S</b>
SUBJE	· <b>፫</b> ጉ	CL	JNJ, LLC		:	
50 101			led Liability Company			
The en	closed Articles of A	mendment and fee(s) are sub	mitted for filing.			
Please	return all correspond	dence concerning this matter	to the following:			
			LINDA LONGO		_	
			Name of Person		_	**
			CLJNJ, LLC		_	
			Firm/Company			
		. 12	2226 154TH ROAD N		_	
			Address			
			JUPITER, FL 33478		<del>-</del>	
		1 <b>2</b> h.	City/State and Zip Code  utterflies@bellsouth.net			
		E-mail address: (t	o be used for future annual report notifi	cation)		
For fur	ther information cor	ncerning this matter, please c	all:			
	Lin	da Longo	at ( 561 )	716-1215		
	Name of I	Person	Area Code & Daytime	: Telephone Numb	ег	
Enclos	ed is a check for the	following amount:				
	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	) Certific	iling Fee, cate of Status & ed Copy onal copy is enclo	osed)
		G ADDRESS:	STREET/COURING Registration Section			

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

CLJNJ	, LLC				
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appear iability Company)	s on our records.			
The Articles of Organization for this Limited Liability Company  Florida document numberL12000057323		05/16/2012	and assigned		
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :			
The new name must be distinguishable and end with the words "Limi "L.L.C."	ted Liability Compa	ny," the designation "Ll	C" or the abbreviation		
Enter new principal offices address, if applicable:	12226 154TH ROAD N				
(Principal office address MUST BE A STREET ADDRESS)					
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)	12226 154TH JUPITER, FL				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here  Name of New Registered Agent:  New Registered Office Address:	<u>e:</u>	eur records, enter the street address.  The street address.	12 SEP IO		
New Registered Agent's Signature if changing Registered Agent-		ក្ រ	<b>T</b>		

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 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 Name Address Type of Action MGRM LONGO, LINDA 12226 154TH ROAD N ✓ Add JUPITER FL 33478 Remove S LONGO, LINDA □ ∧dd Remove  $\prod$  Add Remove Add Remove  $\prod Add$ Remove ∏Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets. if necessary.) CORRECTION OF STREET ADDRESS ABOVE IS FOR UNIT NUMBER ONLY NUMBER SHOULD BE 12226 not 1226 BALANCE OF ADDRESS IS CORRECT September 7 2012 Dated \_

Signature of a member or authorized representative of a member LINDA LONGO

Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00