

Division of Corporations

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L12000058072

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

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To: Division of Corporations
Fax Number : (850) 617-6383

From: Account Name : NICI LAW FIRM, P.L.
Account Number : I20110000008
Phone : (239) 449-6150
Fax Number : (877) 646-0560

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2012 MAY 24 AM 8:22

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****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: _____

**LLC REGISTERED AGENT CHANGE
WATERFORD JAX, LLC**

Certificate of Status	0
Certified Copy	0
Page Count	X 4
Estimated Charge	\$25.00

including this page

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

J. SAULSBERRY
EXAMINER

MAY 25 2012

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Corporate Filing Menu

Help

- Fax Transmission

To: Division of Corporations

From: James R. Nici, Esq.

Fax: +1 (850) 6176383

Date: 5/24/2012

RE: Amendment to Registered Agent

Pages: 5

Comments:

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TALLAHASSEE, FLORIDA

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: Waterford Jax, 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:

Jim Nici

Name of Person

Nici Law Firm

Firm/Company

1185 Immokalee Road, Suite 110

Address

Naples, FL 34110

City/State and Zip Code

jnici@nicilawfirm.com

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

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TALLAHASSEE, FLORIDA

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For further information concerning this matter, please call:

Toni Massey

Name of Person

at (239)

449-6146

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)

Sunbiz Act #: I201100000008
PIN: NLPPL2011

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**

Waterford Jax, 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 30, 2012

Florida document number L12000058072

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 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

New Registered Office Address:

Enter Florida 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 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>	<u>Address</u>	<u>Type of Action</u>
MGR	James R. Nici	1185 Immokalee Road, Suite 110 Naples, FL 34110	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	David W. Shoemaker	1360 East Venice Avenue Venice, FL 34285	<input checked="" 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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

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TALLAHASSEE, FLORIDA

Dated May 4, 2012

15/ David W. Shoemaker
Signature of a member or authorized representative of a member

David W. Shoemaker
Typed or printed name of signee