

#L/2000086809

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(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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12 AUG 27 PM 12:21  
TALLAHASSEE, FLORIDA  
CLERK OF STATE

K. SALY  
EXAMINER

AUG 29 2012

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** JBWSD 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:

Blimie Friedman

Name of Person

Broad Financial

Firm/Company

21 Robert Pitt Drive/Ste 202

Address

Monsey, NY 10952

City/State and Zip Code

jwilcosky@totaltruckparts.net

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

For further information concerning this matter, please call:

Blimie Friedman

Name of Person

at ( 845 )

352-3000

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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**

**JBWSD LLC**

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

FILED  
12 AUG 27 PM 12:21  
SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on July 3, 2012 and assigned Florida document number L12000086809.

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:

8281 SW 128th Street

**(Principal office address MUST BE A STREET ADDRESS)**

Ste 101

Pinecrest, FL 33156

Enter new mailing address, if applicable:

8281 SW 128th Street

**(Mailing address MAY BE A POST OFFICE BOX)**

Ste 101

Pinecrest, FL 33156

**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:

8281 SW 128th Street/Ste 101

*Enter Florida street address*

Pinecrest

, Florida

33156

*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	John B Wilcosky	8281 SW 128th Street Pinecrest, FL 33156	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	John Baker Wilcosky	8281 SW 128th Street Ste 101 Pinecrest, FL 33156	<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.)*

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Dated August 21, 2012.

Blimie Friedman  
Signature of a member or authorized representative of a member

Blimie Friedman  
Typed or printed name of signee