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J. SAULSBERRY EXAMINER

DEC 21 2012

COVER LETTER

TO:	Registration Sect Division of Corp.					
SUBJ	ЕСТ:	Stage Name of Limited	7 LLC d Liability Company			
The e	nclosed Articles of A	mendment and fee(s) are subm	nitted for filing.			
Please	e return all correspond	dence concerning this matter to	the following:			
		Martin	E/kins Name of Person			
		Stag-	e 7 LL C Firm/Company			
		- 9/10 SW	Address	suite /		
			Sville FL 326 City/State and Zip Code Co		2012 DEC 21 AM 9: 00	Ī
For fu	irther information cor	ncerning this matter, please cal	II:	(1) 可 (2)	PE SI	
	Martin Name of	Ellin's Person	at (772) Z&S 07 Area Code & Daytime Te	286 Signature Number	3: 00	**************************************
Enclo	sed is a check for the	following amount:				
\$2	25.00 Filing Fee	□\$30.00 Filing Fee & Certificate of Status	□\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□\$60.00 Filing F. Certificate of Certified Cop. (additional co	Status &	sed)

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

Jake	. 7 LLC	
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our rec Liability Company)	cords.)
The Articles of Organization for this Limited Liability Company Florida document number <u> と 1 2 0000 86 848</u>	were filed on $\frac{57/63}{}$	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the desi	gnation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		TALI SE
(Principal office address MUST BE A STREET ADDRESS)		ARCHIVE TO
		C2
		E E
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		RIDA RIDA
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	fice address on our records	s, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida	street address
	Citv	lorida

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 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 **Type of Action Address** Fan, We: 4/10 SW 34+ St, STE1 Add MGRM Gainesville FL 32608 Remove Remove Add . Remove Add Remove Add

Remove

Ifan	nending any other information, enter change(s) here: (Attach additional sheets, if necessary.)		
			
ted	December 21, 2012.		
	Signature of a member of authorized representative of a member		
	Martin Elhins Typed or printed name of signee		

Page 3 of 3

Filing Fee: \$25.00

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