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JALLAHASSEE, FI ORIDI

B. BOSTICK

SEP 1 0 2012

EXAMINER

COVER LETTER

TO:	Registration Solution Of Col				
CUDII	POT.	.IP Sells	Homes, PLLC		
SUBJI	ECI:		ted Liability Company		
The en	closed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
			Judith Phillips		
	-				
		J	P Sells Homes, PLLC		
			Firm/Company		
		10	23 Blue Heron Avenue		
Address					
		-	he Villages, FL 32162		
		_	City/State and Zip Code		
		ju	dylp4564@gmail.com	2 S	
For fu	rther information of	E-mail address: (concerning this matter, please of	to be used for future annual report notification)	EP-7	
	1.	idith Philling	at (352) 430-5848		
		udith Phillips of Person	at (352) 430-5848 Area Code & Daytime Telephone 1	OF SIAIE Number RELORIDA	
				25 IDA	
Enclos	sed is a check for t	he following amount:			
	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	Certified Copy (additional copy is enclosed)	0.00 Filing Fee, ertificate of Status & ertified Copy dditional copy is enclosed)	
	Regist Divisi P.O. B	LING ADDRESS: ration Section on of Corporations dox 6327 assee, FL 32314	STREET/COURIER ADDRI Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301	ESS:	

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JP	Sells Homes, PLLC			
(<u>Name of the Limited Li</u> ; (A Fl	ability Company as it now appear orida Limited Liability Company)	s on our records.)		
The Articles of Organization for this Limited Liabi	lity Company were filed on	8/7/12	and assigned	
Florida document number L1200010178				
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of th	e limited liability company her	2:		
	Judith Phillips, PLLC			
The new name must be distinguishable and end with the "L.L.C."	ne words "Limited Liability Compa	ny," the designation	"LLC" or the abbreviation	
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	ADDRESS)			
	• • • • • • • • • • • • • • • • • • • •		L SI	
Enter new mailing address, if applicable:			E P	
(Mailing address MAY BE A POST OFFICE BO			SE	
Truming dumess MITI BETTI OFF OF THEE BO				
				
B. If amending the registered agent and/or registered agent and/or the new registered office	registered office address on o	ur records, <u>ente</u>	r the name of the nev	
registered agent uner of the new registered office	o addition include			
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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGKM =	wanaging wiemoer		
<u>Title</u> -	<u>Name</u>	Address	Type of Action
			∴∏ Add
			Remove
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			Add Remove
		ALL ARTHUR STATE OF THE PROPERTY OF THE PROPER	
 			Add Remove
			Add
			Remove
D. If amei	nding any other information, enter chan	ge(s) here: (Attach additional sheets, if neces.	şary.)
_			
		nited Liability Company is organize	ed is:
	REAL ESTATE SALES ÂSS	OCIATE	· - –
-			7
	-		12 SI
			SEP-SEP-
Dated	,		
	Quaith Y	er or authorized representative of a member	
	Signature of a memo	Judith Phillips	:25
	Турс	ed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00