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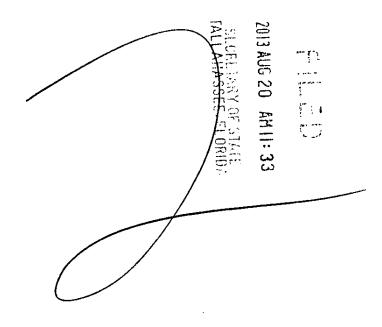
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B. BOSTICK AUG **2 2** 2013

COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: JAROD Enterprise, 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:
Joanna Tukes Name of Person
J4-Rud Enterprise Firm/Company
1662 Stockton 54 Address
Jacksonville, Fl 3004 City/State and Zip Code
City/State and Zip Code Joanna Hukes@ Clearwive.net E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Janna Tukes at (904) 904-9622 = 3 Area Code & Daytime Telephone Number = 3
Enclosed is a check for the following amount: \$\sum_{\begin{align*}cccccccccccccccccccccccccccccccccccc
\$25.00 Filing Fee \$\times \text{S30.00 Filing Fee & Certificate of Status}\$\$ Certified Copy (additional copy is enclosed) \$\times \text{Certified Copy} (additional copy is enclosed)}\$\$\$ Certified Copy (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

JYKOU EMY	terpris	se, LLC	,		
(<u>Name of the Limited</u> (A	Liability Compan Florida Limited Li	iy as it now appears iability Company)	on <u>our records.</u>)		
The Articles of Organization for this Limited Lie Florida document number		were filed on <u>4</u>	1-11-12	and assign	ned
This amendment is submitted to amend the follo	wing:				
A. If amending name, enter the new name of	the limited liabi	lity company here:	:		
				· -	
The new name must be distinguishable and end with "L.L.C."	n the words "Limit	ed Liability Company	y," the designation "	LLC" or the abb	reviation
Enter new principal offices address, if applica	ıble:	1462	Stock to	n 54	 .
(Principal office address MUST BE A STREET	T ADDRESS)	Jackso	nville,	F1 35	2204
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE I	<u>30X)</u>			2013 AUG 20 AH //	
B. If amending the registered agent and/o registered agent and/or the new registered off	r registered off ice address here	ice address on ou	r records, <u>enter</u>	the name of	he new
Name of New Registered Agent: New Registered Office Address:	Thelm 1662	na Stockton	mith n St		
	Lave	Enter	r Florida street ad	dress	,/
	Jackson	NV118	, Florida	3220	4_
		City		Zip Code	

New Registered Agent's Signature, if changing Registered Agent:

101 000

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

Title	Name	Address	Type of Action
CEO	JOANNA TUKES	1662 Stockton St	Add
		Jacksonville, Fl 322	Remove
CFO	Thelma Smith	1462 Stockton St Jacksonville, Fl 3220	
		Jacksonville, Fl 3228	✓ ☐ Remove
Sec	Velma Clark	1662 Stockton St Jacksonville, Fl 32204	
		Jacksonville, Fl 32204	Remove
			Add
			Remove
			Add
		10	Remove
			Add
			Remove

lf ame	ending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
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- d	8-15, 2013.
	The ma Smith
	Signature of a member or authorized representative of a member
	Typed or printed name of signee
	Page 3 of 3

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Filing Fee: \$25.00

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