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SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co	ection rporations				
SUBJECT:	J&S Premi	iere Homes, LLC			
		ted Liability Company			
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.			
Please return all corresp	ondence concerning this matter	to the following:			
		Stephanie Ubeda			
		Name of Person			
	-	Firm/Company			
		5100 SW 86 ST.			
		MIAMI, FL. 33143			
	-	City/State and Zip Code			
	STEP	H.UBEDA@GMAIL.COM	78		
		to be used for future annual report no	tification)		
For further information	concerning this matter, please of	call:			
STER	PHANIE UBEDA	at (305)	607-6970		
Name	of Person .	Area Code & Dayti	me Telephone Number		
Enclosed is a check for	the following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclos	\$60.00 Filing Fee, Certificate of Status & ed) 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

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J&S PREMIERE HOMES, LLC SEGRETARY OF STATE (Name of the Limited Liability Company as it now appears on our Accords ASSEE, FLORIDA (A Florida Limited Liability Company)

The Articles of Organization for this Limited I	Liability Company were filed on	08/17/2012	and assigned	
Florida document numberL1200010	6396			
This amendment is submitted to amend the fol	lowing:			
A. If amending name, enter the new name of	of the limited liability company he	ere:		
Ja	&S PREMIER HOMES, LLC			
The new name must be distinguishable and end w "L.L.C."	ith the words "Limited Liability Comp	pany," the designation "L	LC" or the abbreviation	
Enter new principal offices address, if appli	cable:			
(Principal office address MUST BE A STRE	ET ADDRESS)			
	<u></u>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE	<u></u>			
				
B. If amending the registered agent and		our records, enter 1	the name of the new	
registered agent and/or the new registered of	office address here:			
Name of New Registered Agent:				
Name of New Registered Agent.				
New Registered Office Address:		inter Florida street ada	luare	
	E	Enter Florida street daaress		
	City	, Florida	Zip Code	
	City		sip cone	

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 **Type of Action** Title Name Address MGRM STEPHANIE UBEDA 5100 SW 86 ST. MIAMI, FL. 33143 ✓ Add Remove ∐ Add Remove ___ Add Remove Remove □Add Remove \prod Add __Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated Signature of a member or authorized representative of a member STÉPHANIE UBEDA

Typed or printed name of signee
Page 2 of 2

Filing Fee: \$25.00