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Fax:

ADAMS GALLINAR PA
Division of Corporations

Jul 22 2019 08:03am P001/005

PAGE 01/25

Florida Department of State
Division of Corporations
Electronic Filing Cover Sheet

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

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To:

Division of Corporations
Fax Number : (850)617-6383

From:

Account Name : AGI REGISTERED AGENTS, INC.
Account Number : 12000000205
Phone : (305)416-6800
Fax Number : (305)416-6811

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

Email Address:

Jose@agi-ra.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JUNEPUR LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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Corporate Filing Menu

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07/16/2019 17:14 3054166811

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ADAMS GALLINAR PA

Jul 22 2019 08:03am P002/005
PAGE 02/05

((H19000215392 3)))

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JLNEPUR 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:

Jose M. de la O

Name of Person

AGI Registered Agents, Inc.

Firm/Company

1000 Brickell Ave., Suite 300

Address

Miami, FL 33131

City/State and Zip Code

jose@agi-ra.com

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

For further information concerning this matter, please call:

Jose M. de la O

Name of Person

305

Area Code

416-5800

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed)

MAILING ADDRESS:
Registration Section
Division of Corporations
P.O. Box 5327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:
Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

((H19000215392 3)))

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

(((H19000215392 3)))

JUNEPUR LLC

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

The Articles of Organization for this Limited Liability Company were filed on 09/27/2016 and assigned
Florida document number L12000123615

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JOLLYWUD LLC

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

Enter Florida street address

City, Florida

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 605, 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

(((H19000215392 3)))

Fax:

Jul 22 2019 08:03am P004/005

07/16/2019 17:14 3054166811

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PAGE 34/25

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

(((H19000215392 3)))

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

19 JUL 22 AM 12:00
 CALL CENTER
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary)*

(((H19000215392 3)))

FILED
19 JUL 22 AM 12:00
CLERK OF COURT
JULIA A. GALLINAR

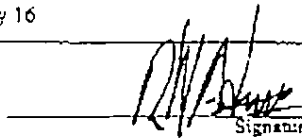
E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated July 16, 2019



Signature of a member or authorized representative of a member

Robert R. Adams, Authorized Representative

Typed or printed name of signer

(((H19000215392 3)))