L12000147383

(Re	equestor's Name)	
(Ad	idress)	
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PICK-UP	WAIT	MAIL
(Bu	isiness Entity Nam	ne)
(Document Number)		
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	





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COVER LETTER

TO:

Registration Section
Division of Corporations

SUBJECT:

JEREMY PERRY 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:

Jeremy Perry

Name of Person

Jeremy Perry LLC

Firm/Company

9842 103rd Street, Lot 28

Address

Jacksonville FL 32210

City/State and Zip Code

pjeremy27@yahoo.com

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

For further information concerning this matter, please call:

Jeremy Perry

904、718-0828

Name of Person

Area Code & 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 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

Jeremy Perry LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.)
		13 TS
The Articles of Organization for this Limited Liability Company	were filed on 11/26/2012	and signed
Florida document number L12000147383		ILE 6 27 IARY HASSE
This amendment is submitted to amend the following:		PH 1: OF STATE. FLORE
A. If amending name, enter the new name of the limited liab	ility company here:	Dan W
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Company," the designation	on "LLC" or the abbreviation
Enter new principal offices address, if applicable:	9842 103rd Street, Lot 28	
(Principal office address MUST BE A STREET ADDRESS)	Jacksonville FL 32210	
Enter new mailing address, if applicable:	9842 103rd Street, Lot 28	
(Mailing address MAY BE A POST OFFICE BOX)	Jacksonville FL 32210	
		<u> </u>
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	t address
	, Florid	a
	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, 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 Johnny E O'Neal Jr. 9842 103rd St Lot 17 **MGRM** Jacksonville FL 32210 Remove Remove Remove Remove

D. If a	mending any other information, enter change(s) here: (Attach additional sheets, if necessary.)
Dated_	August 26, 2013.
	Signature of a member or authorized representative of a member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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SECRETABY OF STATE