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COVER LETTER

TO: Registration Sec Division of Corp					
SUBJECT:	FBD Name of Lim	JR LLC ited Liability Company		_	
The enclosed Articles of A	Amendment and fee(s) are sub	mitted for filing.			
Please return all correspon	ndence concerning this matter	to the following:			
	Fred	B. Devitt Name of Person	7 //		
	<u>FB</u>	DJR LLC Firm/Company			
	30	SE 4th Ave			
	Dav	City/State and Zip Code	33483		
	Fritz & E-mail address: (Atlaw.com to be used for future annual	report notification)	_	
For further information co	oncerning this matter, please ca				
Fred B	Devitt 711. Person	at (<u>511</u>)	276-7436 Daytime Telephone Nu	mber C 29	
Enclosed is a check for th			, .	METARY ETARY ETARY	
	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enc	Ceri losed) Ceri	O Filing Fee, Utificate of Status & ified Copy	

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

FBDJR	LLC
(<u>Name of the Limited Liability</u> (A Florida L	Company as it now appears on our records.) Limited Liability Company)
The Articles of Organization for this Limited Liability Co Florida document number	Impany were filed on $11/27/2012$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limit	ed liability compaπy here:
The new name must be distinguishable and contain the words "Limite	ed 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 ADDRE	ESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered agent and/or the new registered office address	ered office address on our records, enter the name of the new
Name of New Registered Agent:	red B. Deville III Page T
New Registered Office Address:	Enter Florida street address
	, Florida Zip Code
New Registered Agent's Signature, if changing Registered	Agent:
provisions of all statutes relative to the proper and con accept the obligations of my position as registered age	nd agree to act in this capacity. I further agree to comply with the mplete performance of my duties, and I am familiar with and ent as provided for in Chapter 605, F.S. Or, if this document is I office address, I hereby confirm that the limited liability

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

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

MGR = 'Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Fru B. Doubt JR	30 SE 4" Ave	🗆 Add
		Delray Beach, FL 33483	⊠ Remove
			Change
MGR	Fred B. Dwift TIL	30 SE 4th Ave	Æ Add
		Darry Beach, FL 33483	□ Remove
			Change
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			Remove
		TALLAHASSEE, FLORI	ئن ال Kemove
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Filing Fee: \$25.00