L13000084480

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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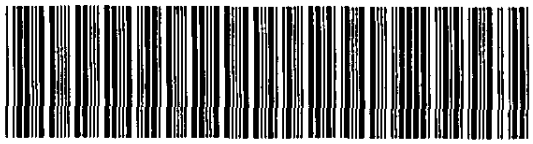

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TALLAHASSEE FLORIDA

J. SAULSBERY
EXAMINER

AUG 21 2013

FLORIDA DEPARTMENT OF STATE
Division of Corporations

August 7, 2013

JOSEPH P. FELICE
626 HERNANDO PL
DAUPHIN ISLAND, AL 36528

SUBJECT: JOBERTA, PLLC
Ref. Number: L13000084480

We have received your document for JOBERTA, PLLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for $25.00.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Deborah Bruce
Regulatory Specialist II

Letter Number: 113A00018921

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# ARTICLES OF AMENDMENT
# TO
# ARTICLES OF ORGANIZATION
# OF

JOBERTA PLLC

(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 JUNE 11 2013 and assigned Florida document number L13000084480

This amendment is submitted to amend the following:

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

JOBERTA LLC

The new name must be distinguishable and end with 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)***

1031 PORTER ST
ST GEORGE ISLAND FL
32328

**Enter new mailing address, if applicable:**
***(Mailing address MAY BE A POST OFFICE BOX)***

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**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: JOSEPH FALICK

New Registered Office Address: 1031 PORTER ST / ST GEORGE ISLAND 32328
*Enter Florida street address*

ST GEORGE ISLAND, **Florida** 32328
*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 |
|---|---|---|---|
| | | | ☐ Add |
| | | | ☐ Remove |
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**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

SPECIFIC PURPOSE

ANY AND ALL BUSINESS

Dated 7/31/2013

Signature of a member or authorized representative of a member

JOSEPH FELICE

Typed or printed name of signee



**Filing Fee: $25.00**

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