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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SHR IFCT:

## JAJA DEVELOPMENT, 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:

PETER T. GIANINO, ESQ.

Name of Person

Grazi & Gianino, LLP

Firm/Company

217 E. Ocean Blvd.

Address

Stuart, FL 34994

City/State and Zip Code

jcasales@gglaweyers.com

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

For further information concerning this matter, please call:

Peter T. Gianino, Eq.

1772 286-0200

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

JAJA DEVELOPMENT, LLC			
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on ou Limited Liability Company)	ır records.)	<del></del>
(**************************************	Similar Salaring Company,		
The Articles of Organization for this Limited Liability	Company were filed on July 23,	2013	and assigned
Florida document number L13000104036			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	nited liability company here:		
The new name must be distinguishable and end with the we "L.L.C."	ords "Limited Liability Company," the	e designation "LLC	" or the abbreviation
Enter new principal offices address, if applicable:		F	201
(Principal office address MUST BE A STREET ADD	DECC)		See The Control of th
Trincipal office address MOST BE A STREET ADD	<u> </u>		10
		(1)	· • · · · · · ·
<b></b>		Line in the second seco	
Enter new mailing address, if applicable:		0) The second se	<del>- 5</del> 1
(Mailing address MAY BE A POST OFFICE BOX)		=======================================	<u> </u>
B. If amending the registered agent and/or regis	starad office address on our re-	oards ontor the	nama of the naw
registered agent and/or the new registered office add		cords, <u>enter the</u>	name of the new
Name of New Registered Agent:			
New Registered Office Address:			
	Enter Flo	rida street address	5
		, Florida	
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MRG	Joseph Melluso	9121 One Putt Place	Add
		Port St. Lucie, FL 3498	6 Remove
MRGM	Joseph Melluso	9121 One Putt Place	🕢 Add
		Port St. Lucie,FL 34986	Remove
Member	Arne L. Rotne, II	1494 NW Coconut Point Lane	Add
		Stuart, Florida 34994	Remove
Member	Jeffrey S. Wade	248 Village Blvd   Suite 3204	- <del>\$</del> □
		Lighthouse Cove at Tequesta	Remove
		Tequesta, Florida 33469	9
Member	Anthony Olivieri	2239 NE Ginger Terrace	Add Add
		Jensen Beach FL 34957	Remove
			_ 
			Remove

D. If amend	ing any other information, enter change(s) here: (Attach additional sheets, if necessary.)
<u>. <del></del> </u>	
Dated July	24 2013
	(Harter)
	Signature of a member or authorized representative of a member
	Peter T. Gianino, Eq. /
	Typed or printed name of signce
	Page 3 of 3
	Eiling Pool \$25.00

Filing Fee: \$25.00

2013 JUL 29 PH 12: 08