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SECRETARY OF STATE ALLAHASSEE, FLORIDA

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T. HAMPTON

COVER LETTER

TO: Registration Sect Division of Corpo			
SUBJECT: BORN	to RIVE JA	m LLC	
	Name of Limit	ed Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspond	lence concerning this matter	to the following:	
	FRAUKIE	Name of Person	
	BORNY	O RIÆ JAM LL Firm/Company	<u>-C</u>
	_ PO Bo	7 320686 Address	
	Tampe	City/State and Zip Code	2686
	Frankle C E-mail address (10	bonton de Jam . be used for future annual report notificati	(O) I/A
For further information con	cerning this matter, please ca	all:	
Name of F	E GGIO Person	at (<u>&3) 334 -458</u> Area Code & Daytime Te	Stephone 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

LOKEN TO MIDE	= JAM CCC	
(<u>Name of the Limited Li</u> (A Fl	ability Company as it now appears on or	<u>ır records.</u>)
The Articles of Organization for this Limited Liab		T 11 20 Fand signed
The Afficies of Organization for this Elimited Liab	The Company were med on 7 1401	
Florida document number _ L\3000 1\5	<u> </u>	SE N -
This amendment is submitted to amend the follows A. If amending name, enter the new name of the		O PM 1: 36
The new name must be distinguishable and end with the "L.L.C."	he words "Limited Liability Company," th	e designation "LLC" or the abbreviation
Enter new principal offices address, if applicable	16: 5835 N ADDRESS) SUHE 6 THUPL, F	breaked House
• •	5014E(
(Principal office address MUST BE A STREET A	ADDRESS) SUITE 16	- 00 :5
	- mpn +	7 32-17
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BO	<i>)X</i>)	
B. If amending the registered agent and/or registered agent and/or the new registered offic	8	cords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
Now Registered Office / Budges.	Enter Flo	rida street address
		, Florida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

Rush

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 amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member Title Title Name **Address** Type of Action MGKM CREGARY AND COMPUNY PA 2706 Comment INE St. Prives lano Fr 33712 FRANKIE GY 100 5835 Manacia Huy 5835 Marchial Hox X Add Scort A Posin MGRM Remove Remove

D. If amending	g any other information, enter change(s) here: (Attach additional sheets, if necessary.)
· <u>(</u> 9	REGAM AND COMPLY PA WAS NEUTR
_A	miniacing wombar of
B	booto River JAM LLC AND WAS
	NHORED INCORRETLY.
Dated	118/2013
	the
	Signature of a member or authorized representative of a member
	FRANKIE GIGGO
	Typed or printed name of signee
	Page 3 of 3
	Filing Fee: \$25.00

FILED
2013 NOV 20 PH 1: 36
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