# L13000117868

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## **COVER LETTER**

TO:

Registration Section
Division of Corporations

SUBJECT:

JERECO CACHE 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:

# Joyce Nelson

Name of Person

# JERECO CACHE LLC

Firm/Company

13951 Martinique Dr

Addres

Seminole, FL 33776

City/State and Zip Code

joyce@joycenelson.net

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

For further information concerning this matter, please call:

Joyce Nelson

Name of Person

,,727,**455-322**5

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

JEDECO CACHE LLO

( <u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears on our recorda Limited Liability Company)	<u>ds.</u> )
The Articles of Organization for this Limited Liabilit Florida document number L13000117868	ty Company were filed on August 21, 20	2013 SEI
This amendment is submitted to amend the following	<b>g</b> :	SSE -> F
A. If amending name, <u>enter the new name of the l</u>	following:    Section   Following   Follow	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the design	ation LLC" of the abbreviatio
Enter new principal offices address, if applicable:		<del> </del>
(Principal office address MUST BE A STREET AD	ODRESS)	
Enter new mailing address, if applicable: ( <u>Mailing address MAY BE A POST OFFICE BOX</u>	2	
B. If amending the registered agent and/or re registered agent and/or the new registered office a		August 21, 2013  and assigned  August 21, 2013  and assigned  August 21, 2013  August 21, 2
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida str	eet address
	, Flor	ida
	City	

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 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
MGRM	Kimberly Nelson	374 Boyd Ave	Add
		Martinsburg, WV 25401	Remove
MGRM	Kris E Nelson	1419 Charolais Drive	Add
		Austin, Tx. 78745	Remove
		TALLAHASS	دیه ؛
<del></del> .		CE. CORIO	Add
			Add
			Remove
			Add
			Remove

f amending any other informa	ation, enter change(s) here: (Attach additional sheets,	if necessary.)
τ,		
4		
	<del></del>	
September 26	2013	
	Casa Dela	
Sig	gnature of a member or authorized representative of a mem	ber
J	loyce Nelson	
	Typed or printed name of signee	

Page 3 of 3

Filing Fee: \$25.00

2013 OCT -2 PM 12: 15
SECRETARY OF SINIE