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2016 JUL -8 PM 12: 34 SECRETARY OF STATE SECRETARY OF STATE

K.SALY EXMAINER JUL 11

COVER LETTER

TO: Registratio Division of	n Section Corporation	1S , .		
SUBJECT:	2 + 3	PROPERTY Se	RVICES, LLC ted Liability Company	
The enclosed Article	s of Amendn	nent and fee(s) are subr	nitted for filing.	
Please return all corr	espondence o	concerning this matter t	to the following:	
		TOHN	FITZGERALI)	
		<u> </u>	FITZGERALI) Name of Person	
		C + J	Planty Stilvice	<u> </u>
			Firm/Company	•
		Po	Dox 331793 Address	
			Address	
		ATLANT	City/State and Zip Code	
			•	. (0.00
		E-mail address: (to	SPROSERVE (SMAIL) o be used for future annual report notif	ication)
For further informati	on concernin	g this matter, please ca	II:	
JOHN	FITZ	SERALD	at (904) 235 - 5 0 Area Code Daytime	014
Na	me of Person		Area Code Daytime	Telephone Number
Enclosed is a check t	for the follow	ing amount:		
□ \$25.00 Filing Fe	e /X \$3	0.00 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

TO ARTICLES OF ORGANIZATION \mathbf{OF}

	URGANIZATIUN
	OF 20/6 JUL -8 PM Pagent Service S. LLC Red Liability Company) 73 CRETARY OF
	2016 1111
C + J PROPERT	7 SERVICES, LLC -8 PM
(<u>Name of the Limited Liability Com</u> (A Florida Limite	npany as it now appears on our records.) ed Liability Company) ALLARY OF STARY any were filed onO9 - 13 - 13 and assigned
	TATASSEE, EL
ne Articles of Organization for this Limited Liability Compa	and assigned on and assigned of
orida document number <u>L13000 129547</u> .	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited li	ability company here:
g, <u></u>	ability company nere.
ne new name must be distinguishable and contain the words "Limited Lia	ability Company," the designation "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:	5430 Manfields PL.
Principal office address MUST BE A STREET ADDRESS)	
	- Shri D SEED!
nter new mailing address, if applicable:	
nter new mailing address, if applicable:	Po Box 331793
nter new mailing address, if applicable:	
nter new mailing address, if applicable: Mailing address MAY BE A POST OFFICE BOX)	PO BOX 331793 ATLANTIC BCH, FL 32233
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>) . If amending the registered agent and/or registered	PO BOX 331793 ATLANTIC BCH, FL 32233 office address on our records, enter the name of the n
nter new mailing address, if applicable: <u>Mailing address MAY BE A POST OFFICE BOX</u>) . If amending the registered agent and/or registered	PO BOX 331793 ATLANTIC BCH, FL 32233 office address on our records, enter the name of the n
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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 605, 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

or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	CORFY L HOOKS	3571 HARTSFIELD FOREST CI	<u>iZ</u> □ Add
		JACKSONVILLE, FL 32277	Remove
			Change
MGR	JOHN FITZGERALD	5430 manfields PL.	K Add
		Jax. FL 32207	□ Remove
			Change
			Add
			Remove
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(If an ei Nòte:	tive date, if other than the date of filing:
	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	July 7 . 2016
	Signature of a member or authorized representating of a member
	CONIT L HUOICS John Fitzgerald

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Filing Fee: \$25.00