

L13000149636

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



100266199561

100266199561
11/10/14--01055--014 **25.00

CLERK OF STATE
TALLAHASSEE, FLORIDA

2014 NOV 10 AM 7:05

FILED

NOV 17 2014
J. BRUCE

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JERK MACHINE @ PLANTATION, LLC

Name of Limited Liability Company

ORIGINAL

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

VETA E. FOOTE

Name of Person

Firm/Company

8801 GATEHOUSE ROAD, UNIT 8

Address

PLANTATION, FLORIDA 33324

City/State and Zip Code

JERKMACHINE100@GMAIL.COM

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

For further information concerning this matter, please call:

VETA E. FOOTE

954

980-0011

Name of Person

at ()
Area Code

Daytime Telephone Number

FILED
2014 NOV 10 AM 7:05
TALLAHASSEE, FLORIDA
CLERK OF SUPERIOR COURT

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

JERK MACHINE @ PLANTATION, LLC

(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 October 23, 2013 and assigned
Florida document number L13000149636

This amendment is submitted to amend the following:

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

 **ORIGINAL**

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

FILED
2014 NOV 10 AM 7:05
CLERK OF STATE
TALLAHASSEE FLORIDA

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:

New Registered Office Address:

Enter Florida street address

_____, 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 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

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	DIEDRE MALCOLM	POST OFFICE BOX 14035	<input type="checkbox"/> Add
		FORT LAUDERDALE, FLORIDA 33302	<input checked="" type="checkbox"/> Remove
AMBR	DANE MALCOLM	POST OFFICE BOX 14035	<input type="checkbox"/> Add
		FORT LAUDERDALE, FLORIDA 33302	<input checked="" type="checkbox"/> Remove
AMBR	DAVID MALCOLM	POST OFFICE BOX 14035	<input type="checkbox"/> Add
		FORT LAUDERDALE, FLORIDA 33302	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input checked="" type="checkbox"/> Remove

2014 NOV 1 AM 7:05
 DEPT. OF STATE
 CALIFORNIA
 FILED

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

VETA E. FOOTE OWNS 100% OF THE SHARES OF

JERK MACHINE @ PLANTATION, LLC

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated OCTOBER 30

2014

Signature of a member or authorized representative of a member

VETA E. FOOTE

Typed or printed name of signee

 ORIGINAL

Page 3 of 3

Filing Fee: \$25.00

FILED
2014 NOV 10 AM 7:05
CLERK OF STATE
TALLAHASSEE, FLORIDA