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Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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Division of Corporations

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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN

JERK MACHINE @ PLANTATION LLC

Certificate of Status	0
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Page Count	03
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JUN-0 1 2015

J SHIVERS

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JERK 1 (Name of the Limite	ACHINE @ PLANTATION d Liability Company as it now appears A Florida Limited Liability Company)	LLC		
The Articles of Organization for this Limited Lie	ability Company were filed on	10/23/2013	and assig	med
Florida document numberL130001496	36			
This amendment is submitted to amend the follo	wing:			
A. If amending name, enter the new name of	the limited flability company her	<u>'e</u> :		
The new name must be distinguishable and end with the	words "Limited Liability Company," the d	esignation "LLC" or the	bbreviation "L.	L.C."
Enter new principal offices address, if applica	able:			
(Principal office address MUST BE A STREE	T ADDRESS)		Sis_	
	p' 4,9		- G1	
				\$ \$
Enter new mailing address, if applicable:			\$ 29 28	∰≯4-ch#+, rs ×ythp4.
(Mailing address MAX BE A POST OFFICE	ROX		हिंद ≥	(POP)
Industrie saler and manager of the sales	<u> </u>			
,			- 	
B. If amending the registered agent and/ registered agent and/or the new registered of		our records, enter	the name o	f the new
Name of New Registered Agent:				
New Registered Office Address:	the state of the s	· · · · · · · · · · · · · · · · · · ·	w × **	
	Enter Flori	da street addrass		
		, Florida	L	
	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 Title Name <u>Address</u> Type of Action 611 Northwest 39th Avenue _MGR_ DAVIS, TREMAYNE L _ Add Lauderhill, Florida 33311 _ Remove _MGR PO BOX 14035 PORTABELLA FLP □ Add Fort Lauderdale, Florida 33302 Remove MGRM PORTABELLA INVESTMENTS, LLC 377 North State Road 7 M Add Suite 201 Plantation, Florida 33317 MGR C. J. A. MALCOLM Post Office Box 14035 U) Fort Lauderdale, Florida 33302 Q) □ Add □ Remove

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