L13000151883

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	:y/State/Zip/Phone	· #)
PICK-UP	MAIT	MAIL
(Bu	siness Entity Nam	ne)
(Do	cument Number)	
·		
Certified Copies	Certificates	of Status
	_	
	·	
Special Instructions to	Filing Officer:	
L		

1

Office Use Only



900262641369

08/01/14--01007--015 **25.00

2014 AUG -1 MARE: 08
SECHE PART OF STATE
TALL ANASSEE, FLORIDA

AUG - 1 2014 T CLINE

COVER LETTER

TO: Registration Se Division of Cor				
subject: <u></u>	Name of Limit	ET Enterprise	s, LLC.	
The enclosed Articles of	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspo	ndence concerning this matter	to the following:		
	Luc	as Branat Name of Person		
	JBLE	Firm/Company	rises, LLC.	
	3783 wood	Address		2014 AUG SECRET
	Lake Wor Tibersi	The FL 33467 City/State and Zip Code C3 ZEOO AOL to be used for future annual report notif	ication)	UG -1 PA
For further information co	oncerning this matter, please ca	all:		
Weas Brame or	andt FPerson	at (954) 465- Area Code Daytime	Telephone Number	
Enclosed is a check for the	ne 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 Certificate of Certified Cop (additional copy	f Status & Dy

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

JBL Governe	Enterpri	sed LC	C .		
(<u>Name of the Limited Llabili</u> (A Florida	ty Company as it now appears on i Limited Liability Company)	our records.)	<u>.</u>		
The Articles of Organization for this Limited Liability C Florida document number	ompany were filed on		$\underline{3}$ and a	ssigned	
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the limi	ited liability company here:				
JSL Govrnet	Enterprises	, LLC.			
The new name must be distinguishable and end with the words "Lir	mited Liability Company," the desig	mation "LLC" or the a	bbreviation	"L,L,C."	-
Enter new principal offices address, if applicable:					
(Principal office address MUST BE A STREET ADDR	RESS)		1 7, 1	22	
			j= (.57- .07-	L Aig
		,	対策	9	, Marian Marian Marian
Enter new mailing address, if applicable:			<u> </u>	<u></u>	` } ` ÿ**7**
(Mailing address MAY BE A POST OFFICE BOX)				32	
			[25]	- III.	
			ह्युत	68	
B. If amending the registered agent and/or regis registered agent and/or the new registered office add		r records, <u>enter</u>	the name	e of the	<u>e new</u>
Name of New Registered Agent:		.,			
New Registered Office Address:					
	Enter Florida street address				
	, Florida				
	City		Zip Cod	e	

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, <u>enter the title, name, and address of each Manager or Authorized Member being added or removed from our records</u>:

MGR = Manager

AMBR = A	uthorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MER	Setostianello Sudano	5837 Worthpoints Ln	b Add
		Baynton Beach Fl 33437	☐ Remove
			Add
			☐ Remove
		· · · · · · · · · · · · · · · · · · ·	23 25 26 26 26
		·	小地 22 1
		 	Remove Control Add So
			Add S
			☐ Remove
			Add
			☐ Remove
			🗆 Add
			☐ Remove
	•		

Effective date, if other than the date of filing: 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 Tuly 28th Signature of a member or authorized representative of a member Lucas Brandt Typed or printed name of signee	Dated Tuly 28th, 2014. Signature of a member or authorized representative of a member Was Brandt					· · · · · · · · · · · · · · · · · · ·					
Dated Tuly 28th, 2014. Signature of a member or authorized representative of a member (UCOS Brankt	Dated Tuly 28th, 2014. Signature of a member or authorized representative of a member Was Brandt	_									
Dated TUY 28th, 2014. Signature of a member or authorized representative of a member Was Brandt	Dated TUY 28th, 2014. Signature of a member or authorized representative of a member WOS Brandt	_									
Dated TUTY 28th , 2014 . Signature of a member or authorized representative of a member (UCOS Brankt	Dated TUY 28th , 2014. Signature of a member or authorized representative of a member UCOS Brankt				· · · · ·						
Dated TUY 28th , 2014 . Signature of a member or authorized representative of a member (UCOS Brankt	Dated TUIY 28th , 2014. Signature of a member or authorized representative of a member UCOS Brandt	_									
Dated TUTY 28th , 2014 . Signature of a member or authorized representative of a member (UCOS Brankt	Dated TUY 28th , 2014. Signature of a member or authorized representative of a member UCOS Brankt				· · · · · · · · · · · · · · · · · · ·		 				
Dated July 28th, 2014. Signature of a member or authorized representative of a member (UCOS Brandt	Dated July 28th, 2014. Signature of a member or authorized representative of a member (UCOS Brankt	Effectiv	e date. if other	than the date	e of filin	g:			(optional)		
Signature of a member or authorized representative of a member (UCOS Brandt	Signature of a member or authorized representative of a member (UCOS Brandt						d date and canno	t be more than 9	(optional) O days after		
Signature of a member or authorized representative of a member	Signature of a member or authorized representative of a member (1) (0) Branch	the date	this document is file	d by the Florida	Departmen	nt of State)		be more than 9	(optional) 0 days aft er		
Signature of a member or authorized representative of a member	Signature of a thember or authorized representative of a member (1) (0) Branch	he date	this document is file	d by the Florida	Departmen	nt of State)		be more than 9	(optional) 0 days after		
Lucas Brandt Typed or printed name of signee	Cucas Brandt Typed or printed name of signee	the date	this document is file	d by the Florida	Departmen	nt of State) , 2014 Sucer	 ett		(optional) O days after		
Typed or printed name of signee	Typed or printed name of signee	the date	this document is file	d by the Florida	Departmen	nt of State) , 2014 Sucer	 ett		(optional) O days after		
	,	the date	this document is file	d by the Florida	Department	nt of State) , 20/4 Decention or author	 at ized representativ		(optional) O days after		

Page 3 of 3

Filing Fee: \$25.00