U14000006637

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
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COVER LETTER

Division of Cor				
SUBJECT: JWM	C ENTERRIS	ES LLC		
NOBJECT:	······································	nited Liability Company	·	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	James W M	cCann		
		Name of Person		
	JWMC Ente	rprises LLC		
		Firm/Company	·	
	785 Oakleat	f Plantation Pwky	/ #232	
		Address		
	Orange Par	k, Fl 32065		2011 Sf
	rosmcnoles@aol			2014 MAR 12 AM D: 43
Lian firmthon in farmation a	E-mail address: (to be used for future annual report notifi	ication)	12 A
			400	=
James W N	ICCann	at (904) 860-94		
ivanie o	i rerson	Area Code Daytime	Telephone Number	
Enclosed is a check for th	ne following amount:			
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified Co	of Status &

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**

JWMC ENTERPRISES LI	LC				
(Name of the Limi	ted Liability Company (A Florida Limited Lia	y as it now appears on our records.) ability Company)		-	
The Articles of Organization for this Limited L. Florida document number L1400006637	iability Company w	vere filed on January 13, 2014	and	assigned	d
This amendment is submitted to amend the following	lowing:				
A. If amending name, enter the new name of	of the limited liabili	ity company here:			
The new name must be distinguishable and end with the	words "Limited Liabili	ity Company," the designation "LLC" or	the abbreviatio	n "L.L.C.	•••
Enter new principal offices address, if applic	cable:	9825 San Jose Blvd #1			
Principal office address MUST BE A STREE	ET ADDRESS)	Jacksonville, FI 32257	, sand	2[
			1	2014 HAR	
Enter new mailing address, if applicable:		785 Oakleaf Plantation Pky	vy #232	2	<u> </u>
Mailing address MAY BE A POST OFFICE	BOX)	Orange Park, FI 32065	7	<u> </u>	1:1
			<u> </u>		·'
B. If amending the registered agent and registered agent and/or the new registered o	-	-	ter the nan	ည် <u>ne of tl</u>	ne nev
Name of New Registered Agent:	JAMES W M	CCANN			
New Registered Office Address:	785 Oakleaf	Plantation Pkwy #232 Enter Florida street address			
	Orange Park		32065		
	Oldingo i air	City	32065 Zip Co	de	
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

Page 1 of 3

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:

	athorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Add
		 	Remove
			Add
			F3 D
			2014 MAE
			Repove 11
			D Add
			Remove
		** ************************************	☐ Remove
			□ Remove

f amending any other information, enter change(s) here: (Attac	th additional sheets, if necessary
	144414
ective date, if other than the date of filing: effective date must be specific, cannot be prior to date of receipt or filed date at date this document is filed by the Florida Department of State)	(optional) nd cannot be more than 90 days after
ed March 9 2014	
icu	
la Wi	
Signature of a member or authorized repr	resentative of a member
James W McCann	resentative of a member

Page 3 of 3

Filing Fee: \$25.00