

L14000013168

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

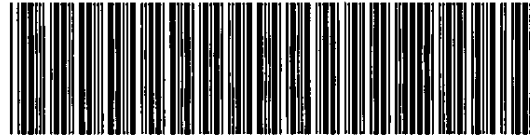
\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

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DIVISION OF CORPORATIONS  
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APR - 3 2014  
J. HARRIS

**STANCO & ROBINSON, LLC**

2390 TAMiami TRAIL NORTH  
THE CHAMBER BLDG. SUITE 216  
NAPLES, FLORIDA 34103

239.263.7755  
FAX 239.263.8955

ALEXANDRIA, VA  
ANNAPOLIS, MD  
WASHINGTON, DC  
FT. LAUDERDALE, FL

March 21, 2014

Department of State  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Re: James International Properties, LLC**  
**Document No. L14000013168**

Dear Sir or Madam:

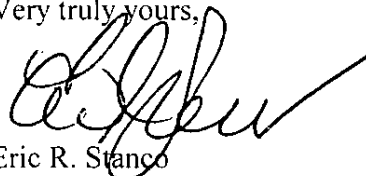
We are counsel for the above-referenced entity, James International Properties, LLC, and its managing member, James International, LLC, a Delaware company.

Enclosed for filing on behalf of the Florida limited liability company, James International Properties, LLC is the following:

1. Articles of Amendment to Articles of Organization;
2. Our check in the amount of \$25.00 to cover the filing fee.

Thank you for your kind assistance in this matter.

Very truly yours,



Eric R. Stanco

ERS:lmj  
Enclosures

## James International Properties LLC

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:

MGR = Manager  
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	James International Corp.	2390 Tamiami Trail North	<input type="checkbox"/> Add
		Suite 216	<input checked="" type="checkbox"/> Remove
		Naples, FL 34103	
MGR	James International LLC	2390 Tamiami Trail North	<input checked="" type="checkbox"/> Add
		Sutie 216	<input type="checkbox"/> Remove
		Naples, FL 34103	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

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

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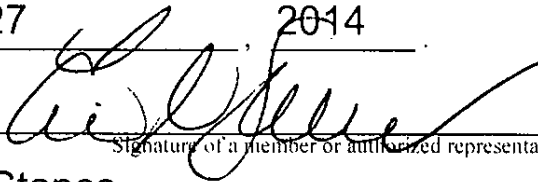
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E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(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 January 27, 2014



Signature of a member or authorized representative of a member

Eric R Stanco

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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