

L14000013581

(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



000262666760

07/29/14--01008--002 **25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL 29 PM 4:07

JUL 29 2014
J. HARRIS

COVER LETTER

RETURN ADDRESS:

JAPP LLC
Attn: JAN C. ALEXNDER
103 SQUIRREL POINT
LORIDA, FLORIDA 33857

DAYTIME PHONE NUMBER:

561-827-3308

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: **JAPP LLC**

Name of Limited Liability Company

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

Please return all correspondence concerning this matter to the following:

JAN C. ALEXANDER

Name of Person

JAPP LLC

Firm/Company

103 SQUIRREL POINT

Address

LORIDA, FL 33857

City/State and Zip Code

martelforbes@yahoo.com

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

For further information concerning this matter, please call:

JAN C. ALEXANDER

Name of Person

at **561** **827-3308**

Area Code

Daytime Telephone Number

Enclosed is a check for the 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 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**

JAPP 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 01/24/2014 and assigned
Florida document number L14000013581.

This amendment is submitted to amend the following:

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

N/A

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)

N/A

*** Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

103 SQUIRREL POINT
LORIDA, FL 33857

FILED
STATE
DIVISION OF CORPORATION
14 JUL 29 PM 4:07

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:**

103 SQUIRREL POINT

Enter Florida street address

LORIDA

City

, Florida 33857

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>
MGR	JAN C. ALEXANDER	1013 SOUTH LAKESIDE DRIVE	<input type="checkbox"/> Add
		LAKE WORTH, FLORIDA 33460	<input checked="" type="checkbox"/> Remove
MGR	JAN C. ALEXANDER	103 SQUIRREL POINT	<input checked="" type="checkbox"/> Add
		LORIDA, FLORIDA 33857	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
 SECRETARY OF STATE
 DIVISION OF CORPORATIONS
 14 JUL 29 PM 4:07

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

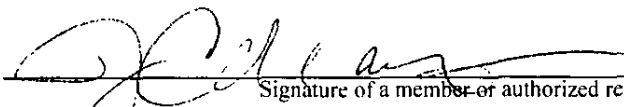
NOTE: The address of 1019 South Lakeside Drive, Lake Worth, Florida 33460
must be removed from this LLC.

- The ONLY address listed anywhere for this LLC should read as: 103 Squirrel Point, Lorida, FL 33857

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 July 25, 2014



Signature of a member or authorized representative of a member

JAN C. ALEXANDER

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 JUL 29 PM 4:07