- L140000046390

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COVER LETTER

	stration Section of Corpo		•		
J SUBJECT: _	PN Propertie	s. LLC			
SODJECI	,	Name of Limit	ed Liability Company		
The enclosed A	Articles of A	mendment and fee(s) are subm	nitted for filing.		
Please return a	all correspond	lence concerning this matter to	the following:		
		Juan P. Noboa			
			Name of Person		_
		JPN Properties, LLC			
			Firm/Company		_
		10130 NW 4th court			
			Address		-
		Pembroke Pines, Florida 330	City/State and Zip Code 26		_
		E-mail address: (to	be used for future annual re	port notification)	
For further inf	ormation con	cerning this matter, please cal	1:		
Juan P. Noboa	à		at ()	7910	
	Name of F	Person	Area Code	Daytime Telephone Numb	ਰ
Enclosed is a c	check for the	following amount:			
≘ \$25.00 Fil	ling Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclo	sed) Certific	ate 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

JPN Properties, LLC	
(Name of the Limited Liability Company as it (A Florida Limited Liability	now appears on our records.) Company)
he Articles of Organization for this Limited Liability Company were for	led on 03/20/2014 and assigned
lorida document number L14000046390	
his amendment is submitted to amend the following:	
. If amending name, enter the new name of the limited liability co	mpany here:
Setlogix Construction Development LLC	
he new name must be distinguishable and contain the words "Limited Liability Com	pany," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	· · · · · · · · · · · · · · · · · · ·
n	:
The fact of the date of the St. A. St	i-
	
	<u> </u>
nter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX)	
s. If amending the registered agent and/or registered office ac	dress on our records, enter the name of the
egistered agent and/or the new registered office address here:	
Name of New Registered Agent:	
New Registered Office Address:	
New Registered Office Address	Enter Florida street address
	, Florida
Cit	

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 Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person_being added</u> <u>or removed from our records</u>:

MGR =	Manager	
AMBR =	Authorized	Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□ Add
			□ Remove
			□ Change
			☐ Add
			Remove
			Change
			Add
			□ Remove
			☐ Change
			□ Add
		·····	□ Remove
			Change
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			D Add
			П Rеточе
			Change

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ffective date, if other than the date of filing: an effective date is listed, the date must be specific and cannot be prior to date of filing lote: If the date inserted in this block does not meet the applicable statutory ocument's effective date on the Department of State's records.	(optional) gor more than 90 days after filing.) Pursuant to 605.026 filing requirements, this date will not be listed a
e record specifies a delayed effective date, but not an effecti The 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlier
ated December 26	6

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Typed or printed name of signee

Filing Fee: \$25.00