

Mar. 28. 2014 2:47PM

LAW OFFICE

No. 72

1/5

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Florida Department of State  
Division of Corporations  
Electronic Filing Cover Sheet

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To: Division of Corporations  
Fax Number : (850) 617-6383

From: Account Name : SANTUCCI, PRIORE & LONG, P.L.  
Account Number : I20090000107  
Phone : (954) 351-7474  
Fax Number : (954) 351-7475

\*\*Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

Email Address: \_\_\_\_\_

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
JORADA HOLDINGS, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
Estimated Charge	\$25.00

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SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

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J. Shivers MAR 31 2014

**COVER LETTER**

((H14000075205 3)))

**TO:** Registration Section  
Division of Corporations

**SUBJECT:** JORADA HOLDINGS, 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:

Joseph V. Priore

Name of Person

SANTUCCI PRIORE, P.L.

Firm/Company

200 South Andrews Avenue, Suite 100

Address

Fort Lauderdale, FL 33301

City/State and Zip Code

jpriore@500law.com

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

For further information concerning this matter, please call:

Joseph V. Priore

Name of Person

at ( 954 ) 351-7474

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 &  
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(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

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LAW OFFICE

No. 4672 P. 3/5

((H14000075205 3)))

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

**This amendment is submitted to amend the following:**

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

**(Principal office address MUST BE A STREET ADDRESS)**

**(Mailing address MAY BE A POST OFFICE BOX)**

**New Registered Office Address:**

Enter Florida street address

\_\_\_\_\_, **Florida** \_\_\_\_\_  
City Zip Code

*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.*

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No. 4672 P. 4/5

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: (((H14000075205 3)))

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary)

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Article V - The effective date for this Limited Liability Company shall be:

03/26/2014

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 March 28

2014

Signature of a member or authorized representative of a member

Joseph V. Priore, Esq.

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED  
MAR 28 2014  
TALLAHASSEE, FLORIDA

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