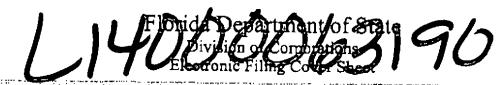
Division of Corporations



Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000216840 3)))



Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : ROSSWAY SWAN TIERNEY BARRY LACEY & OLIVER, P.L.

Account Number : 120050000159 Phone : (772)231-4440 Fax Number : (772)231-4430

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

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN J & K 1 PALMER ENTERPRISES, LLC

Certificate of Status Certified Copy Page Count 04

Estimated Charge \$60.00

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April 20, 2018

FLORIDA DEPARTMENT OF STATE

Division of Corporations

J & K 1 PALMER ENTERPRISES, LLC 3055 - STE STREET, S.W. VERO BRACE, FL 32968

SUBJECT: J & K 1 PALMER ENTERPRISES, LLC

REF: L14000063190

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

The name designated in your document is unavailable since it is the same as, or it is not distinguishable from the name of an existing entity.

Please select a new name and make the correction in all appropriate places. One or more major words may be added to make the name distinguishable from the one presently on file.

The document number of the name conflict is L15000026365 "L & L ENTERPRISES, LLC".

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Karen A Saly Regulatory Specialist II FAX Aud. #: H18000124091 Letter Number: 218A00008097

		COVER LETTER	(((H18000216840 3)))			
TO: Registratio Division of	n Section Corporations					
SUBJECT:	Palmer Enterprises, LLC					
	Name of Li	mited Liability Company				
The enclosed Articles	s of Amendment and foo(s) are su	bmitted for filing.				
Please return all corre	espondence concerning this matte	r to the following:				
	Kevin M. Barry					
		Name of Person				
	Rossway Swan Tierney Barry Lacey & Oliver					
	<del></del>	Firm/Company				
	2101 Indian River Blvd., Suite 200					
		Address				
	Vero Beach, FL 32960					
		City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·			
	kbarry@rosswayswan.com					
		(to be used for future annual report r	not(fication)			
For further informatio	n concerning this matter, please of	rail:				
Kevin M. Barry		772 231-4440	)			
Nam	e of Person	Area Code Day	time Telephone Number			
Englosed is a check fo	or 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

(((H18000216840 3)))

J&K 1 Pulmer Enterprises,LLC

## ARTICLES OF AMENDMENT (((H18000216840 3))) ARTICLES OF ORGANIZATION

(Name of the Limited Li	ability Compa orda Limited L	ny as It now appears on our reability Company)	ecords.)		
The Articles of Organization for this Limited Liabili Florida document number L14000063190	ty Company	were filed on April 17, 20	and assigned		
This amendment is submitted to amend the following					
A. If amending name, enter the new name of the	. LL	C	"LLC" or the abbreviation "94" C"		
Enter new principal offices address, if applicable:		4 Palmer Drive	1000		
(Principal office address MUST BE A STREET AL	DRESS)	Sebastian, FL 32958			
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)		4 Palmer Drive Schastian, FL 32958			
B. If amending the registered agent and/or re- registered agent and/or the new registered office a	gistered off ddress here:	ice address on our rec	ords, enter the name of the new		
Name of New Registered Agent: Luther L. Fitch, Jr.					
New Registered Office Address: 4 Palmer Drive		Emer Florida street ac	/A		
Sei	bastian	Enter Plorida Mittel de	, Florida <sup>32958</sup>		
_		City	Zip Code		
New Registered Agent's Signature, if changing Register	ered 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.

Page 1 of 3

(((H18000216840 3)))

## If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person, being added or removed from our records: (((H18000216840 3)))

MGR = Manager AMBR = Authorized Member

Title	Name	Address	Type of Action
MGR/AN	Luther L. Fitch, Jr.	4 Palmer Drive	
<del></del>		Sebastian, FL 32958	D Add
			Remove
MGR/AI/	Kathleen A. Swan-Fitch	3055 5th Street, SW	•
		Vero Beach, FL 32968	
			■ Remove
			Change
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		Signature of	a member or author	zod reprotantanya di	member		

Page 3 of 3

Filing Fee: \$25.00

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