L14000114586

(Re	equestor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nan	ne)
(Do	cument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

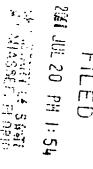


200316080682

07/28/18--01004--011 **25.00



B FIGUEROA JUL 20 2018



COVER LETTER

		stration Sec sion of Corp		
SUBJEC		Jason Ham	ilton LLC	
SUBJEC	. : ا		Name of Lim	ited Liability Company
The encl	osed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.
Please re	eturn :	all correspon	dence concerning this matter	to the following:
			Dale L Dransfield	
				Name of Person
				Firm/Company
			2650 Shiloh Way	
				Address
			Tallahassee, FL 32308	
				City/State and Zip Code
			ddransfield@comcast.net	to be used for future annual report notification)
For furth	er int	ormation co	ncerning this matter, please ca	·
Dale L (Drans			850 443-1644 at ()
		Name of	Person	at () Area Code Daytime Telephone Number
Enclosed	l is a	check for the	following amount:	
\$25. 0	00 Fi	ing 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

STREET/COURIER ADDRESS: Registration Section Division of Corporations Clifton Building

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jason Hamilton LLC		
(<u>Name of the Limited Liability Compa</u> (A Florida Limited)	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 07/21/2014	and assigned
Florida document number L14000114586		
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
		数とこ
Enter new mailing address, if applicable:		20 11.E
(Mailing address MAY BE A POST OFFICE BOX)		14 是 口
		-00 23.
		高品 学
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		ter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
	, Florida	
	City	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 amending Authorized Person(s) authorized to manage, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address	Type of Action
MGR	Dale L Dransfield	2650 Shiloh Way	Add
		Tallahassee, FL 32308	□ Remove
			Change
			□ Remove
			Change
		·	
			☐ Remove
			☐ Change
			□ Add
			Remove
			Change
			Remove 1
			SSET OF STANDARD ASSETS ASSETTS ASSETS ASSETS ASSETS ASSETS ASSETTS
			Remove
			☐ Change

Change FEIN to: 83-1273793						
					.,_	
						
		<u>.</u>				
	 	···				
ective date, if other than the date of effective date is listed, the date must be specification of the date inserted in this block document's effective date on the Department.	cific and cannot be pr es not meet the app	licable statutory			g.) Pursuant t	
record specifies a delayed effective ne 90th day after the record is		not an effect	ive time, at	12:01 a.m.	on the e	arlier
July 20	2018	·			E E	2厘
		1			:\	
Signate	ire of a member or au	ithorized represer	itative of a memb	oer	SSE	20

Page 3 of 3

Filing Fee: \$25.00