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COVERLETTER

TO: Registration Section Division of Corporations	
SUBJECT: JBD & RAD ENTERPRISES 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:	
Teff Du Bois Name of Person	
JBJG RAD ENTERPISES LLC Firm/Company	
800 N.W. FORK RD. 3-1 Address	
STUART FL. 34994 City/State and Zip Code Jeff dubots 1028 & GMAIL. Companies E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: Teff Dubots 478, 206-97857	
E-mail address: (to be used for future annual report notification)	1
For further information concerning this matter, please call:	
all all	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
\$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & \$\Bigcup \$55.00 Filing Fee & \$\Bigcup \$60.00 Filing Fee, \$\Bigcup \$\Bigcu	

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

	ENTERPRISES LLC
(<u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records.) orida Limited Liability Company)
The Articles of Organization for this Limited Liabilit Florida document number <u>L/50000387</u>	ty Company were filed on $03/03/2015$ and assigned 149 .
This amendment is submitted to amend the following	g:
A. If amending name, enter the new name of the l	limited liability company here:
The new name must be distinguishable and contain 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 AD	DDRESS)
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	AR SSR
B. If amending the registered agent and/or re registered agent and/or the new registered office a	egistered office address on our records, enter 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 Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being a or removed from our records:			
MGR = Manager AMBR = Authorized Member			
<u>Title</u>	Name	Address Type of Action	
MGR	Jeff Du Bois	800 N.W. FORD3-1 STURET FL.	
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		Change	
		Add	
		Remove	
		Change	
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tive date, if other than the date of filing:	(optional)
effective date is listed, the date must be specific and cannot be prior to date: If the date inserted in this block does not meet the applicable s	tatutory filing requirements, this date will not be list
ment's effective date on the Department of State's records.	
ecord specifies a delayed effective date, but not an	effective time, at 12:01 a.m. on the earlie
e 90th day after the record is filed.	
1 / / / 3 - 2)A/K	
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	ea.
d 11-13-2015, Jeff Du Bo's Jeff Du Bo	RA. representative of a member

Page 3 of 3

Filing Fee: \$25.00