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Electronic Filing Cover Sheet

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.

(((H15000235050 3)))



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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

Account Name : FOLEY & LARDNER

Account Number : 072720000061

Phone : (904)359-2000

Fax Number : (904)359-8700

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

Enail Address: SbutleR & Foley. com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JAX BEACH HOSPITALITY GROUP LLC

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Certificate of Status	0
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Electronic Filing Menu

Corporate Filing Menu

Help

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION' OF

H15000235050 3

JAX BEACH HOSPITALITY GROUP LLC		
(Name of the Limited Liability (A Florida I	Company as it now appears on our records. imited Liability Company)	<u>(,</u>)
The Articles of Organization for this Limited Liability Co.	mpany were filed on AUGUST 19, 201	5 and assigned
Florida document number L15000140002	•	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	
The new name must be distinguishable and contain the words "Limite	d 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 ADDRE	(SS)	
		型治・あ
		SE FI
Enter new mailing address, if applicable:		- F
Mailing address MAY BE A POST OFFICE BOX		MR O M
		10 E
		製芸豆
B. If amending the registered agent and/or registered agent and/or the new registered office addre		enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		···
	Enter Florida street address	
		rida
	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.

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 added or removed from our records:

MGR = Manager AMBR = Authorized Member

H1500023:	50503
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<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	JAY DOBSON	3009 Antigua Drive	
		Jacksonville Beach, FL 32250	≅ Removċ
			Change
MGR	GREGORY SAIG	1440 Beach Avenue	= Add
		Atlantic Beach, FL 32233	☐ Remove
			Change
	18,		Add SECOND DATE OF SECOND DESCRIPTION OF SE
			And
		413 - 423	Change
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effective date is listed, the date must be specific and cannot be p	rior to date of filing or more than 90 days after filing.) Pursuant so 605.0
If the date inserted in this block does not meet the appearant's effective date on the Department of State's record	olicable statutory filing requirements, this date will not be listed
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anned enacified a delayed offeetive date. but	not an effective time, at 12:01 a.m. on the earlier
ne 90th day after the record is filed.	not an enective time, at 12,01 a.m. on the earner
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d September 30 2015	
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Company of the compan	
Signature of a member of a	uthorized representative of a member

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Filing Fee: \$25.00