

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

From: Account Name : FOLEY & LARDNER
Account Number : 072720000061
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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.****

Email Address: Julie@onewayoutjax.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
ONE WAY OUT JACKSONVILLE, LLC

Certificate of Status	0
Certified Copy	0
Page Count	03
Estimated Charge	\$25.00

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AUG 02 2016

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

H16000185122 3

One Way Out Jacksonville, LLC

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

The Articles of Organization for this Limited Liability Company were filed on 9/14/2015

Florida document number L15000153165

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

8011 Philips Highway, Suite 3

Jacksonville, FL 32256

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

Julienne A. Owens

New Registered Office Address:

8011 Philips Highway, Suite 3

Enter Florida street address

Jacksonville

Florida

32256

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 added or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Charles Howard	3502 Westover Road	<input type="checkbox"/> Add
		Fleming Island, FL 32003	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Juliene A. Owens	8011 Philips Highway, Suite 3	<input type="checkbox"/> Add
		Jacksonville, FL 32256	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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FLORIDA
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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) H16000185122 3

Article XIV of the Articles of Organization of One Way Out Jacksonville, LLC, dated September 4, 2015 and
filed September 14, 2015, shall hereafter have no force or effect.

E. Effective date, if other than the date of filing: _____ (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated July 20, 2016.

Julienne A. Owens
Signature of a member or authorized representative of a member

Julienne A. Owens

Typed or printed name of signor

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2016 JUL 20 1 18:50
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TALLAHASSEE, FLORIDA