LIGIOUU3891

(Requ	estor's Name)	
(Addre	ess)	
(Addr	ess)	
(City/s	State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Busi	ness Entity Nan	ne)
(Docu	ıment Number)	
Certified Copies	Certificates	of Status
Special Instructions to Fi	ling Officer:	
		:

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COVER LETTER

то	: Registration Se- Division of Cor			
SU	Jariska Ente BJECT:	erprises LLC		
		Name of Limi	ted Liability Company	
The	e enclosed Articles of	Amendment and fee(s) are subr	nitted for filing.	
Ple	ase return all correspo	ndence concerning this matter t	to the following:	
		Gregory S. Wood		
			Name of Person	····
		Jariska Enterprises LLC		
			Firm/Company	
		17595 SE 106th Avenue		
			Address	
		Summerfield, FL 34491		
		1 1 0 1	City/State and Zip Code	
		greg.wood.realtor@gmail.co	om o be used for future annual report notifi	cation)
For	further information co	oncerning this matter, please ca		
Gre	egory S. Wood		at () 210-8186 Area Code Daytime	
	Name of	f Person	Area Code Daytime	Telephone Number
End	closed is a check for th	ne following amount:		
	\$25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ S60.00 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Jariska Enterprises LLC			
(Name of the Limited Liability Com (A Florida Limite	pany as it now appears on our d Liability Company)	records.)	
he Articles of Organization for this Limited Liability Compar lorida document number L16000003891	ny were filed on $\frac{01/06/2016}{1}$	and assi	gned
nis amendment is submitted to amend the following:			
If amending name, enter the new name of the limited lia	ability company here:		
/A			
ne new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation		C."
nter new principal offices address, if applicable:	N/A	(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)	
Principal office address MUST BE A STREET ADDRESS)	•	12 m	1
THE CONTROL WAS THE STATE OF TH		O.P.	<u></u>
		्राप्ता कर्म प्राप्ता क्ष्म	M
nter new mailing address, if applicable:	N/A	TEST TO	D
, 11		RIGHT 4	
Mailing address MAY BE A POST OFFICE BOX)	-,	Dw. 1	
. If amending the registered agent and/or registered egistered agent and/or the new registered office address have a second of New Pagistered Agent. Gregory S. W.	<u>ere</u> :	ecords, enter the name o	of th
Name of New Registered Agent: Gregory S. w	700 u	<u> </u>	
New Registered Office Address:	Enter Florida stree	address	
New Registered Office Address:	Enter Florida stree	address . Florida	

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.

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>	Address	Type of Action
AMBR	Vicky J. Wood	17595 SE 106th Avenue	□ Add
		Summerfield, FL 34491	■ Remove
			☐ Change
AMBR	Gregory S. Wood	17595 SE 106th Avenue	Add
		Summerfield, FL 34491	□ Remove
			☐ Change
			□ Add
			Remove
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The 90th day after the rec	Man on Se	Dorl	ve of a member	PETAL STATE	17
The 90th day after the rec	Man on Se	or authorized representati	ve of a member		

Page 3 of 3

Filing Fee: \$25.00