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Office Use Only



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K. SALY
SEP 2 2 2018

COVER LETTER

O: Registration Section Division of Corporations
UBJECT: Juicy tarian Franchising LLC Name of Limited Liability Company
he enclosed Articles of Amendment and fee(s) are submitted for filing.
lease return all correspondence concerning this matter to the following:
Melanie Hyer Name of Person
Firm/Company
1680 Meridian Ave #101 Address
Miani Beach FL 33139 City/State and Zip Code Probate Property group @ gmail. com E-mail address: (to be used for war annual report notification)
E-mail address: (to be used for warrennual report notification)
or further information concerning this matter, please call:
Melanie Hyer at (305) 335-7502 Name of Person Area Code Daytime Telephone Number
section of the following amount: \$25.00 Filing Fee \$\Bigcup \$30.00 Filing Fee & Certificate of Status \$\Bigcup \$\text{Certificate of Status}\$ \$55.00 Filing Fee & Certificate of Status \$\Bigcup \$\text{Certificate of Status}\$ \$\Bigcup \$\text{Solutional copy is enclosed}\$ \$\Bigcup \$\text{Solutional copy is enclosed}\$ \$\Bigcup \$\text{Solutional 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

t '	2016 00
Juicytar	ian Franchising LL SEP 19 PM 3: 36 da Limited Liability Company)
(Name of the Limited Liabi (A Florid	lity Company as it now appears on our records.) And Society Company)
	1 -1 "OFF. FINDS
The Articles of Organization for this Limited Liability	Company were filed on $2/35/16$ and assigned 0.2
Florida document number <u>L 16000399</u>	<u>21</u> .
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the lin	nited liability company here:
Probate Proper	ty Group LLC. mited Liability Company." the designation "LLC" or the abbreviation "L.L.C."
The new name must be distinguishable and contain the words "Li	mited 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 ADD	(RESS)
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	
	istered office address on our records, enter the name of the new
registered agent and/or the new registered office ad-	<u>dress nere</u> :
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Florida street address
	, Florida
	City Zin 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, <u>enter the title, name, and address of each person being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member			FILEO		
<u>Title</u>	<u>Name</u>	Address	FILED 2016 SEP 19 PK 3: 36 SECRETARY OF STATE FALLAHASSEE, FLORID:	Type of Action	
			TALLAHASSEE, FLORIDA	Add	
				Remove	
				□ Change	
 					
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	FILE
	2016 SEP 19 PM 3: 36
	PATTERICIONE 3: 36
	AHASSEE. FLORID.
(If an e Note :	tive date, if other than the date of filing:
	ecord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: e 90th day after the record is filed.
Dated	sept 11, 2016.
	Signature of a member or authorized representative of a member
	Melanie Hyer Typed or phinted name of signce

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Filing Fee: \$25.00