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(Re	equestor's Name)	
(Ac	ddress)	
(Ac	idress)	
(Ci	ty/State/Zip/Phone #)	
PICK-UP	MAIL MAIL	
(Bu	usiness Entity Name)	
(Document Number)		
Certified Copies	Certificates of Status	
Special Instructions to	Filing Officer:	

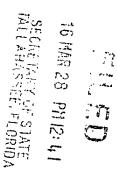
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MAR 3 0 2016 J. HARRIS

COVER LETTER,

TO: Registration Section Division of Corporations
SUBJECT: Jason Popelle Name of Limited Lizbility Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Jason Eric Pape Name of Person
Jason Pope UC Firm/Company
SLA Thomas Barbay Dr.
Melbourne FL 32935 City/State and Zip Code
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Name of Person at (371) 914 - 2353 Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Scrifficate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Scrifficate of Status Certified Copy (additional copy is enclosed) \$25.00 Filing Fee Scrifficate 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

Jason Pope	uc	
(<u>Name of the Limited Libability C</u> (A Florida Lin	Company as it now appears on our recornited Liability Company)	'ds.)
The Articles of Organization for this Limited Liability ComFlorida document number \(\bigcup_1\) \(\lambda 0000\) \(\sigma_1\).	pany were filed on Macch 1	7, 251 Pand assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	•
•		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u></u>	26 5 16 5
		AR 28
Enter new mailing address, if applicable:		75 <u>2</u> 111
(Mailing address MAY BE A POST OFFICE BOX)		10 10 10 10 10 10 10 10 10 10 10 10 10 1
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		ds, enter the name of the new
·		
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street addr	ess
•		lorida
	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> Name Address Type of Action William H. POPC 561 Thomas Barbar Melboune, PZ 32535 ☐ Change SGG Thomas Barbour Dr. MC BOULLE, FL 32935 Jason E. Pope □ Remove ☐ Change □ Add ☐ Remove □ Change _□ Add ☐ Remove ☐ Change ☐ Change □ Add □ Remove ☐ Change

LLC "Jason Pope LLC" Owns the Ficticious na "Jason Pope Carpentry" - This Ficticious Name has been changed from "Jason.	
Owns the Ficticians na "Jason Pope Carpentry" - This Ficticions Name has	
This Ficticious Name has	
This Ficticious Name has	
This Ficticious Name has	popellc"
	popelle"
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Effective date, if other than the date of filing:	ling.) Pursuant to 605,0207 (3) late will not be listed as the
The 90th day after the record is filed.	
Dated March 22 2010.	~
Ison Iso	
Signature of a member or authorized representative of a member	SECTION OF
Jason Pope	AR AR
Typed or printed name of signee	
D 4 . 64	PH IZ: 1
Page 3 of 3 Filing Fee: \$25.00	SATE L