

L16000121843

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

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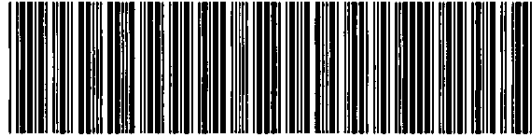
(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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SEP 04 2016

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: J.J. Cooper, LLC

Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Jacob J. Michaelis

Name of Person

J.J. Cooper, LLC

Firm/Company

PO Box 1147

Address

Fernandina Beach, FL 32035

City/State and Zip Code

jakemichaelis@gmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Jacob J. Michaelis

843

725-8890

at (_____) _____

Name of Person

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

☒ \$25.00 Filing Fee

☐ \$30.00 Filing Fee &
Certificate of Status

☐ \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed)

☐ \$60.00 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**

J.J. Cooper, 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 6/24/16 and assigned Florida document number L16000121843.

This amendment is submitted to amend the following:

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

jj Cooper, LLC

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

216 Centre Street

Fernandina Beach, FL 32034

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

PO Box 1147

Fernandina Beach, FL 32035

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:

Elizabeth B. Michaelis

New Registered Office Address:

1702 Highland Dunes Way

Enter Florida street address

Fernandina Beach

Florida 32034

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	John Lecker	18 Salt Marsh Drive	<input type="checkbox"/> Add
		Amelia Island, FL 32034	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	Jacob J. Michaelis	1702 Highland Dunes Way	<input checked="" type="checkbox"/> Add
		Fernandina Beach, FL 32034	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

To recap, we are making the following changes:

- Change Registered Agent to Elizabeth B. Michaelis, 1702 Highland Dunes Way, Fernandina Beach, FL 32034
- REMOVE John Lecker from the LLC completely
- Add Jacob J. Michaelis as MGR of the LLC
- Change name of the LLC from J.J. Cooper, LLC "to" jj Cooper, LLC (removing the periods between jj)

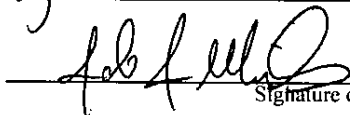
E. Effective date, if other than the date of filing: _____ **(optional)**

(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.

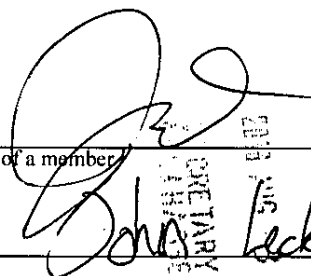
Dated August 1, 2016.



Signature of a member or authorized representative of a member

Jacob J. Michaelis

Typed or printed name of signer



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TALLAHASSEE, FLORIDA

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