## L16000176976

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## **COVER LETTER**

TO: Registration Section Division of Corporations
SUBJECT: JGP Commercial Property Service LL 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:
Carlos Mellizo Jr
JGP Commercial Property Services LLC Firm/Company 4 Loop # 105
2009 Courtyard Loop #105
Sanford FL 32771  City/State and Zip Code  Croellizoir Dicloud.com  Emplieddess: (to be used for future actual serior) actification.
E-mail address: (to be used for Juture annual report notification)  For further information concerning this matter, please call:
For further information concerning this matter, please call:
Cavlos Mellizo Jr at (239) 822 - 1810  Name of Person  Area Code  Daytime Telephone Number  50
Enclosed is a check for the following amount:
Certificate of Status  Certificate of Status  Certificate of Status  Certificate of Status  Certificate Of Status &  Certificate Of Status &  (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**

JGP Comm	nercial Property Services
( <u>Name of the Limited Liability Co</u> (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number <u>L1600176976</u>	
his amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
he new name must be distinguishable and contain the words "Limited I	Liability Company," the designation "LLC" or the abbreviation "L.L.C"
nter new principal offices address, if applicable:	<b>三</b>
Principal office address MUST BE A STREET ADDRESS	<u>S)</u>
	<u> </u>
nter new mailing address, if applicable:	*
Mailing address MAY BE A POST OFFICE BOX)	<b>9</b>
3. If amending the registered agent and/or registere egistered agent and/or the new registered office address	ed office address on our records, <u>enter the name of the nester</u> :
Name of New Registered Agent:	
N. D. '. 1000 A11	
New Registered Office Address:	
New Registered Office Address:	Enter Florida street address
New Registered Office Address:	Enter Florida street address , Florida

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 Title Name <u>Address</u> AMBR Carlos Mellizo Jr Sanford, FL 3277 MANDE ☐ Remove ☐ Change AR Sandra J Guisao Perez 2009 Sanford Fu ☐ Change ☐ ÆK ☐ Remove ☐ Change ☐ Add \_□ Remove ☐ Change ☐ Add ☐ Remove ☐ Change ☐ Add ☐ Remove

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Note: If the	ate, if other that date is listed, the da date inserted in t effective date on	his block does	not meet tl	he applicable	ate of filing or	more than 90 ing requiren	(optional) days after filing nents, this date	.) Pursuant to 6 will not be I	605.0207 (isted as tl
	specifies a del h day after the			but not a	n effective	time, at	12:01 a.m.	on the ea	rlier of:
	Mox	10th		2016					
Dated	<u> </u>		/ /	_					

Page 3 of 3

Filing Fee: \$25.00