L6000222572

(Re	equestor's Name)	
(Ar	ddress)	
(Ac	ddress)	
(Ci	ity/State/Zip/Phone	· #)
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D. SCOTT JUL 6 2017

COVER LETTER

TO: Registration S Division of Co			
	ingfisher, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Jeff Curry c/o Jill Price, Pa	ıralegal	
		Name of Person	
•	Husch Blackwell, LLP		
		Firm/Company	
	CBL Center, Suite 150, 20	30 Hamilton Place Blvd.	
		Address	 _
	Chattanooga, Tennessee 3	7421	
		City/State and Zip Code	
	sonnyjackson@cardmonroc E-mail address: (com to be used for future annual report no	tification)
For further information	concerning this matter, please c	all:	
Jeffery V. Curry		423 490-8642	
Name	of Person	at () Area Code Daytii	ne Telephone Number
Enclosed is a check for t	<u>-</u>	_	
S25.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy - (additional copy is enclosed)
Regist Divisi P.O. F	JNG ADDRESS: tration Section on of Corporations Box 6327 tassee, FL 32314	STREET/COUR Registration Secti Division of Corpo Clitton Building 2661 Executive C	HER ADDRESS:

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	Jackson-Kinş	-			
(Name of the Limiter	l Liability Compa A Florida Limited I	ny as it now appears on our records.) Liability Company)			
The Articles of Organization for this Limited Lia Florida document number $\frac{116000222572}{1}$	bility Company	were filed on December 8, 2016	and assigned		
This amendment is submitted to amend the follow	wing:				
A. If amending name, enter the new name of t	the limited liab	ility company here:			
The new name must be distinguishable and contain the wor	rds "Limited Liabif	ity Company," the designation "LLC" or th	ic abbreviation "L.L.C."		
Enter new principal offices address, if applicable:		11347 Front Beach Road, Unit 614			
(Principal office address MUST BE A STREET		Panama City Beach, Florida 32407			
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		Panama City Beach, Florida 32407 ffice address on our records, enter the name of the			
registered agent and/or the new registered offi	• • •	-			
Name of New Registered Agent:			<u> </u>		
New Registered Office Address:	11347 Front Be	ach Road, Unit 614	F 5 T		
		Enter Florida street address	32407 SupCode 12		
	Panama City B	Cuy Florida	32407.		
New Registered Agent's Signature, if changing Re		Vay	egy code 1/2		
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this company has	r and complete ered agent as p egistered office	performance of my duties, and La provided for in Chapter 605, F.S.	m familiar with and Or, if this document is		

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

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Effective date fan effective da Note: If the da	e, if other than the date te is listed, the date must be sp ate inserted in this block do	of filing:	o date of filing or more th ble statutory filing req	(optional) an 90 days after filing.) Pu airements, this date wil	irsuant to 605.0207 I not be listed as
document's eff	fective date on the Departn	nent of State's records.			
e record sp	pecifies a delayed effe day after the record is		an effective time	at 12:01 a.m. on	the earlier o
The 90th o		2017		-	م
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Page 3 of 3

Filing Fee: \$25.00