Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H170000243173)))



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From:

Account Name : DAVID C. HASTINGS, CPA, PA

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Fax Number

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**Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please. **

DATOCPA ETAMPHONG, RD. COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JACKEN, LLC

Certificate of Status	1
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Electronic Filing Menu

Corporate Filing Menu

Help

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Jan. 26. 2017 9:48AM

H170000243173,

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JACKEN, LLC			
(Name of the Limited Liability Comp. (A Florida Limited	any as it now appears on our records.) Liability Company)		
The Articles of Organization for this Limited Liability Company Florida document number £160002 2 77289	were filed on 12/15/2016 and assigned		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ullity company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."		
Enter new principal offices address, if applicable;	6702 GULF BLVD		
Principal office address MUST BE A STREET ADDRESS)	ST PETE BEACH, PL 33706		
Enter new mailing address, if applicable:	SAME		
Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her	ffice address on our records, enter the name of the new		
Name of New Registered Agent:			
New Registered Office Address:	Enter Florida street address		
	Otanida		

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 affice 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

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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
MGR	DONALD D WOOSLEY	1521 59TH ST S	
		GULPPORT, FL 33707	≅ Remove
			Change
MGR	MICHAEL SCHAPFER	6702 GULF BLVD	
		ST PETE BEACH, FL 33706	[] Remove
			□ Change
MGR	BRIAN DAHLBERG	6702 GULF BLVD	■ Add
		ST PETE BEACH, FL 33706	□ Remove
		· · · · · · · · · · · · · · · · · · ·	Change
		·	D Add
			Remove
			Choose Add
			Change
	· · ·		□ Add
			☐ Remove
			Change

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If amendii	ng any other information	, enter change(s) here: (Attach additional s	heets, if necessary.)	
				
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(If an effective Note: If the	date, if other than the date date is listed, the date must be see date inserted in this block as effective date on the Depar	specific and cannot be prior to date of filing or more that focs not meet the applicable statutory filing requ	(optional) an 90 days after filing.) Pursuant to 60 aircments, this date will not be lis	5.0207 (3)(t stells the
the record) The 90	i specifies a delayed ef th day after the record	fective date, but not an effective time, is filed.	at 12:01 a.m. on the ear.	lier of:
Dated JAN	NUARY 26	2017		
,	m	nature of a president or authorized representative of 8 m	nember	
	MICHAEL SCHAFFER			
		Typed or printed name of signee		

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