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Office Use Only



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Fig 477.22 Fig 3: 19

J. HARRIS

COVER LETTER

Div	ision of Cor	porations					
SUBJECT:	SAN PABLO VILLAGE LLC						
WDJECT.	Name of Limited Liability Company						
The enclosed	l Articles of .	Amendment and fee(s) are sub-	mitted for filing.				
Please return	all correspo	ndence concerning this matter	to the following:				
		JASON M TRAGER, ESQ)				
		Name of Person					
		ANSBACHER & SCHNEIDER, PA					
	Firm/Company						
		5150 BELFORT RD BUILDING 100					
		Address					
		JACKSONVILLE, FL 32256					
	City/State and Zip Code						
		JOE@JOEINJAX.COM					
		E-mail address: (to be used for future annual report notific	ation)			
For further in	nformation co	oncerning this matter, please ca	all:				
JASON M T	'RAGER		904 296-0199				
	Name of	f Person	at () Area Code Daytime T	Telephone Number			
Enclosed is a	check for th	ne following amount:					
■ \$25.00 F	iting 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:

TO:

Registration Section

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

it now appears on our records.) ty Company)	
11 11 11 1 2017	
e filed on JULY 11, 2017	and assigned
	-
company here:	
	63
ompany," the designation "LLC" or th	ne abbreviation "L.L.C."
37 PABLO OAKS CT	. 5.
JITE 102	C-1
CKSONVILLE, FL 32224	1
	· ·
37 PABLO OAKS CT	
JITE 102	
CKSONVILLE, FL 32224	
3	company here: Company," the designation "LLC" or the 337 PABLO OAKS CT UITE 102 ACKSONVILLE, FL 32224 UITE 102 ACKSONVILLE, FL 32224

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>	Address	Type of Action
M	ANSBACHER & SCHNEIDER PA	5150 BELFORT RD	
		BUILDING 100	■ Remove
		JACKSONVILLE, FL 32256	☐ Change
M	JOYCE DEVELOPMENT GROUF	4337 PABLO OAKS CT	——— J ■ Add
		SUITE 102	-
		JACKSONVILLE, FL 32224	Change
			Remove
			□ Change
			Add
			Remove
			Ghange
			D-Add
			☐-Remove
			- D Change
			□ Remove
			□ Change

	
etive data if other than the date of filings	(antianul)
ctive date, if other than the date of filing:	e than 90 days after filing.) Pursuant to 605.020
e: If the date inserted in this block does not meet the applicable statutory filing to	requirements, this date will not be listed a
ument's effective date on the Department of State's records.	
record specifies a delayed effective date, but not an effective ting the 90th day after the record is filed.	ne, at 12:01 a.m. on the earlier o
ie sour day arter the record is filed.	6-1 6-1
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JANUARY 18, 2018 ed	1 · 1 ·
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00