

L17000 163712

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

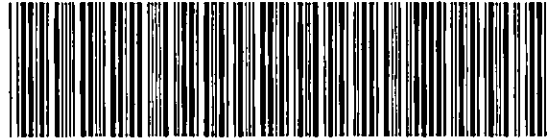
(Business Entity Name)

(Document Number)

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FILED

2013 MAR -8 P 12:56
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

MAR 19 2013

T. LEMIEUX

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: ME JUPITER 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:

MICHAEL KERN

Name of Person

ME JUPITER LLC

Firm/Company

3900 E INDIANTOWN RD STE 607 #250

Address

JUPITER FL 33477

City/State and Zip Code

GHEDGER@GRASSICPAS.COM

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

For further information concerning this matter, please call:

MICHAEL KERN

954

734-0115

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**

FILED

ME JUPITER LLC

2019 MAR -8 P 12:56

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

The Articles of Organization for this Limited Liability Company were filed on 08/01/2017 and assigned
Florida document number L17000163712.

This amendment is submitted to amend the following:

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

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)

3755 MILITARY TRAIL

JUPITER FL 33458

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3900 E INDIANTOWN RD STE 607 #250

JUPITER FL 33477

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:

New Registered Office Address:

3900 E INDIANTOWN RD STE 607 #250

Enter Florida street address

JUPITER

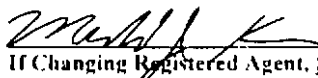
City

Florida 33477

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 | MICHAEL KERN | | <input type="checkbox"/> Add |
| | | | <input type="checkbox"/> Remove |
| | | 3900 E INDIANTOWN RD STE 607 #250 | <input checked="" type="checkbox"/> Change |
| | | JUPITER, FL 33477 | |
| AMBR | APRIL KERN | | <input type="checkbox"/> Add |
| | | 2141 S ALTERNATE A1A STE 430 | <input checked="" type="checkbox"/> Remove |
| | | JUPITER, FL 33477 | |
| | | | <input type="checkbox"/> Change |
| MBR | JENNIFER KOCH | 2141 S ALTERNATE A1A STE 607 #250 | <input checked="" type="checkbox"/> Add |
| | | Jupiter, FL 33477 | |
| | | | <input type="checkbox"/> Remove |
| | | | <input type="checkbox"/> Change |
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D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins or other markings on the paper.

03/01/2019

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 MARCH 6, 2019

M. J. K. Signature

Signature of a member or authorized representative of a member

MICHAEL J KERN

Typed or printed name of signee