

L17000259930

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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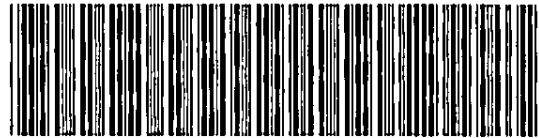
(Business Entity Name)

(Document Number)

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18 JAN 22 AM 9:36
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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JMS RE HOLDINGS, 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:

CAROL A. VANCE

Name of Person

CAROL A. VANCE, ESQ, CPA, PLLC

Firm/Company

411 55TH AVE

Address

ST PETE BEACH, FL 33706

City/State and Zip Code

CVANCE@CAVCPA.COM

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

For further information concerning this matter, please call:

CAROL VANCE

727

367-1222

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**

JMS RE HOLDINGS, LLC

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

The Articles of Organization for this Limited Liability Company were filed on DECEMBER 21, 2017 and assigned
Florida document number 117000259930

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 "LLC."

Enter new principal offices address, if applicable:

2527 W MARYLAND AVE UNIT A

(Principal office address MUST BE A STREET ADDRESS)

TAMPA, FL 33629

Enter new mailing address, if applicable:

2527 W MARYLAND AVE UNIT A

(Mailing address MAY BE A POST OFFICE BOX)

TAMPA, FL 33629

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:

JANSEN MANAGEMENT SERVICES, LLC

New Registered Office Address:

2527 W MARYLAND AVE UNIT A

Enter Florida street address

TAMPA

City

Florida 33629

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>
AMBR	JANSEN MANAGEMENT SERVICES, LLC	2527 W MARYLAND AVE	<input type="checkbox"/> Add
		UNIT A	<input type="checkbox"/> Remove
		TAMPA, FL 33629	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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9:36
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2014

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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 January 5th 2018

Signature of a mem

Signature of a member or authorized representative of a member

DAVID C. JANSEN

DAVID C JANSEN
Typed or printed name of signee