## 11800024758

| (Re  | equestor's Name)                     |                      |
|--|--------------------------------------|----------------------|
| (Ad  | Idress)                              |                      |
| (Ac  | ldress)                              |                      |
| (Cit   | ty/State/Zip/Phone                   | e #)                 |
| PICK-UP  | WAIT                                 | MAIL                 |
| (Bu  | isiness Entity Nan                   | ne)                  |
| (Do  | ocument Number)                      |                      |
| Certified Copies                                 | _ Certificates                       | s of Status          |
| Special Instructions to<br>2/15/18<br>NEW NOWNES | Filing Officer:  Spelling c  Steight | oriection<br>rer. Sw |
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18 FEB 13 AN IN 26 SECRETARY OF STATE TALLAHASSEE, FLORIDA

S. WARREN FEB 1 5 2018

## **COVER LETTER**

| TO:          | Registration Se<br>Division of Cor |  |   |   |
|--------------|------------------------------------|--|---|---|
| f<br>SUBJI   | JLT HOLD                           |  | ·   | a   |
| (            | <u> </u>                           | Name of Lim  | nited Liability Company   |   |
| The en       | closed Articles of                 | Amendment and fee(s) are sub   | amitted for filing  |   |
|              |                                    | ndence concerning this matter  | _   |   |
|              |                                    | MARK STEIGHNER   |   |   |
|              |                                    |  | Name of Person  | <del> </del>  |
|              |                                    |  | Firm/Company  |   |
|              |                                    | PO BOX 413   | TimeCompany   |   |
|              |                                    |  | Address   |   |
|              |                                    | MARY ESTHER, FL 3250   | 59  |   |
|              |                                    | Mark P Steigh  | City/State and Zip Code  Oner C GMAIL, Co  To be used for future annual report not  | ,<br>,<br>,   |
| For fur      | ther information co                | E-mail address: ( concerning this matter, please co                              |   | fication)   |
|              | STEIGHNER                          | ,, p   | 727 366-6808  |   |
| <del></del>  | Name of                            | f Person   | Area Code Daytim  | e Telephone Number  |
| Enclos       | ed is a check for th               | e following amount:  |   |   |
| <b>\$2</b> : | 5.00 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 |
|              | Registra<br>Divisio<br>P.O. Bo     | ING ADDRESS:<br>ation Section<br>in of Corporations<br>ox 6327<br>ssee, FL 32314 | STREET/COURI<br>Registration Section<br>Division of Corpor<br>Clifton Building<br>2661 Executive Co<br>Tallahassee, FL 32 | on<br>rations<br>enter Circle   |

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

| JLT HOLDINGS LLC  |                                      |   |                                     |
|---|--------------------------------------|---|-------------------------------------|
| (Name of the Limited  | Liability Compa<br>Florida Limited I | ny as it now appears on our t<br>Liability Company) | ecords.)                            |
| he Articles of Organization for this Limited Liab   | oility Company                       | were filed on 1-29-18                               | and assigned                        |
| orida document number L18000024758  | ·                                    |   |                                     |
| his amendment is submitted to amend the follow  | ving:                                |   |                                     |
| If amending name, enter the new name of t   | he limited liab                      | ility company here:                                 |                                     |
| L.T. HOLSINGS OF FLORIDA, L.L.C.  |                                      |   |                                     |
| e new name must be distinguishable and contain the wor  | ds "Limited Liabi                    | lity Company," the designation                      | "LLC" or the abbreviation "L.L.C."  |
| nter new principal offices address, if applicable:  |                                      | 428-A MARY ESTHER CUT-OFF                           |                                     |
|   |                                      | FT WALTON BCH, FL 32548                             |                                     |
|   |                                      |   |                                     |
| nter new mailing address, if applicable:  Sailing address MAY BE A POST OFFICE BOX)                                     |                                      | PO BOX 413  |                                     |
|   |                                      | MARY ESTHER, FL 32569                               |                                     |
|   |                                      |   |                                     |
|   |                                      |   |                                     |
| If amending the registered agent and/or gistered agent and/or the new registered office.  Name of New Registered Agent. | _                                    | <u>e</u> :  | cords, <u>enter the name of the</u> |
| gistered agent and/or the new registered office of New Registered Agent:  | ce address her                       | e:<br>Hner  | cords, enter the name of the        |
| gistered agent and/or the new registered offi   | ce address her                       | e: HNER ESTHER CUT-OFF                              |                                     |
| gistered agent and/or the new registered office of New Registered Agent:  | ce address her                       | e:  HNER  ESTHER CUT-OFF  Enter Florida street      |                                     |

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 kindled wibility 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:

| <u>Title</u> | <u>Name</u>  | <u>Address</u> | Type of Action       |
|--------------|--------------|----------------|----------------------|
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|  | ,   | 1-29-18   |   |
| E <b>. Effe</b><br>(If an                          | ective date, if other than the date of effective date is listed, the date must be speci   | filing: 1-29-18 (opt  | ional)<br>er filing.) Pursuant to 605.0207                        |
| (If an<br><b>Not</b>                               | effective date is listed, the date must be speci  | filing:(opt<br>fic and cannot be prior to date of filing or more than 90 days aften<br>not meet the applicable statutory filing requirements, the | er filing.) Pursuant to 605.0207                                  |
| (If an<br><u>Not</u><br>doc                        | effective date is listed, the date must be speci<br>e: If the date inserted in this block does<br>ument's effective date on the Departmen   | filing:   | er filing.) Pursuant to 605.0207<br>is date will not be listed as |
| (If an<br><u>Not</u><br>doct                       | effective date is listed, the date must be specie: If the date inserted in this block does ument's effective date on the Department record specifies a delayed effect he 90th day after the record is f   | filing:   | er filing.) Pursuant to 605.0207<br>is date will not be listed as |
| (If an<br><u>Not</u><br>doct<br>If the r<br>(b) Th | effective date is listed, the date must be specie: If the date inserted in this block does ument's effective date on the Department record specifies a delayed effect he 90th day after the record is fed | filing:   | er filing.) Pursuant to 605.0207<br>is date will not be listed as |
| (If an<br><u>Not</u><br>doct<br>If the r<br>(b) Th | effective date is listed, the date must be specie: If the date inserted in this block does ument's effective date on the Department record specifies a delayed effect he 90th day after the record is fed | filing:   | er filing.) Pursuant to 605.0207<br>is date will not be listed as |

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Filing Fee: \$25.00