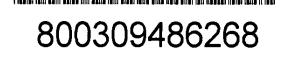
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PICK-UP	WAIT	MAIL
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Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

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Y SULKER MAR 2 2 2018



FLORIDA DEPARTMENT OF STATE Division of Corporations

March 8, 2018

JANET L ECK 7384 HUNTINGTON SUMMIT BLVD LAKELAND, FL 33810

SUBJECT: LULAROEJAM2, L.L.C. Ref. Number: L18000032499

We have received your document for LULAROEJAM2, L.L.C. and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Yasemin Y Sulker Regulatory Specialist II

Letter Number: 818A00004747



ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

LuLaRoeJAM2, L.L.C.				
(Name of the Limited Liability (A Florida Li	Company as it now appears on our records.) imited Liability Company)			
The Articles of Organization for this Limited Liability Con Florida document number	npany were filed on February 5, 2018	and	assign	ed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited	d liability company here:			
JAM2 Holdings, L.L.C.				
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the a	ıbbreviation	"L.L.C	
Enter new principal offices address, if applicable:			··,	
(Principal office address MUST BE A STREET ADDRES	(22			
Enter new mailing address, if applicable:			<u> </u>	
(Mailing address MAY BE A POST OFFICE BOX)	·		E E	<u> </u>
		Control	_ 70 %	***
		(c) (N)		
B. If amending the registered agent and/or register	red office address on our records, enter	the nan	ıe—en	the new
registered agent and/or the new registered office addres	s here:		9	E TANKE
			61	
Name of New Registered Agent:				· ——
New Registered Office Address:				
	Enter Florida street address		·	
	, Florida			
	City	Zin Ca		

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>	Name	Address	Type of Action		
			Add		
			Remove		
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Effective date, if oth f an effective date is listed Note: If the date inserdocument's effective d	i, the date must be specified in this block does	ic and cannot be p not meet the ap	plicable statut	ling or more than sory filing require	(optional) 00 days after filing ements, this date	.) Pursuant to	605.0207
e record specifies	a delayed effecti er the record is fi	ve date, but led.	not an effe	ctive time, a	: 12:01 a.m.	on the ea	arlier of
The 90th day aft							
The 90th day aft							
The 90th day aft		QINI	189	sentative of a men			

Page 3 of 3

Filing Fee: \$25.00