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(Req	uestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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Certified Copies	Certificates	s of Status
Special Instructions to F	iting Officer:	
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2018 OCT 29 PH 3: 10
SECRETARY OF STATE
TALL AHASSEE, FLORIDA

FILED

JL-19-18

COVER LETTER

TO: Registration Se Division of Cor		•	
JIM'S RV S SUBJECT:	SALES LLC		
	Name of Lim	ited Liability Company	

The enclosed Articles of	Amendment and fee(s) are sub	mitted for filling.	•
Please return all correspo	indence concerning this matter	to the following:	
	JAMES SUMMERS		
	Name of Person Firm/Company 2095 US HIGHWAY 17N Address SEVILLE, FL 32190 City/State and Zip Code E-mail address: (to be used for future annual report notification)		
			notification)
		Firm/Company	
	2095 US HIGHWAY 17N		
	***	Address	
	SEVILLE, FL 32190		
		City/State and Zip Code	
	E-mail address: (to be used for future annual report notif	ication)
	oncerning this matter, please ca	all:	
JAMES SUMMERS		732 406-2727	
Name o	f Person	at () Area Code Daytime	Telephone Number
Enclosed is a check for the	ne following amount:		
■ \$25.00 Filing Fee	S30.00 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

JIM'S RV SALES LLC		
(<u>Name of the Limited Liability</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Collorida document number <u>L18000117304</u>	ompany were filed on 05/10/2018	and assigned
his amendment is submitted to amend the following:		
. If amending name, <u>enter the new name of the limit</u>	ted liability company here:	
he new name must be distinguishable and contain the words "Limit	ited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDR	ESS)	
nter new mailing address, if applicable:		
<u>lailing address MAY BE A POST OFFICE BOX)</u>		
Tanks and the second		
If amending the registered agent and/or regist istered agent and/or the new registered office addr		2018 SEC
Name of New Registered Agent:		
New Registered Office Address:		SEE 29
	Enter Florida street address , Florid	FLORE
	City	" Er Zip Cole

gistered Agent's Signature, if changing Registered Agent:

y accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the ons of all statutes relative to the proper and complete performance of my duties, and I am familiar with and he obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is 'ed to merely reflect a change in the registered office address, I hereby confirm that the limited liability has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

	Januarized Person(s) authorized to manag	e, <u>enter the title,</u>	name, and	address of eac	h person	being added
or remove	d from our records:					

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	MARINA SUMMERS	2095 US HIGHWAY 17N SEVILLE, FL 32190	Add
			☐ Remove
			□ Change
			□ Add
			□ Remove
			□ Change
			
			Remove
			Change
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Filing Fee: \$25.00