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## **COVER LETTER**

Division of Corporations		
THE JDC EXPERIENCE LLC SUBJECT:		
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:		
Jacklyn Crisanti Name of Person		
The JDC Experience LLC		
7050 SUNSET CLYVE, APT 709		
South Pasadena FL 33707 City/State and Zip Code	75	
E-mail address: (to be used for future annual report notification)	) FEB 2	
For further information concerning this matter, please call:	_	
Jame of Person at (203) 997-6507 Area Code Daytime Telephone Number	PH ቴ፡ ቴ৪	OF STATE REGRATIONS
Enclosed is a check for the following amount:		łs
\$25.00 Filing Fee Solution Sol	itus &	



TO:

Registration Section

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



January 30, 2019

JACKLYN CRISANTI THE JDC EXPERIENCE LLC 7050 SUNSET DRIVE, APT 709 SOUTH PASADENA, FL 33707

SUBJECT: THE JDC EXPERIENCE LLC

Ref. Number: L18000272776

We have received your document for THE JDC EXPERIENCE LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The document must be signed by a member or an authorized representative of a member.

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) 245-6050.

Diane Cushing Senior Section Administrator

Letter Number: 319A00002162

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(Name of the Limited	Liability Compai Florida Limited L	iy as it now appears iability Company)	on our records.)	<del></del>	
The Articles of Organization for this Limited Liab Florida document number <u> </u>		were filed on	1/21/2018	and ass	gned
This amendment is submitted to amend the follow	ving:				
A. If amending name, enter the new name of t					
The new name must be distinguishable and contain the wor	1	ty Company," the de-	signation "LLC" or the	abbreviation "L.l	"C."
Enter new principal offices address, if applical	ole: 14/14				<u> </u>
(Principal office address MUST BE A STREET	<u>ADDRESS)</u>	<del> </del>			· () () ()
Enter new mailing address, if applicable: \(\int\)	)/A			.B 21 PM 4:	TRICED STORY OF ST
(maning data cas man 1 be at 1 out of 1 tee be	<u>v</u>			±3	ATIONS DIS
B. If amending the registered agent and/or registered agent and/or the new registered officers.			our records, <u>ente</u>	r the name	of the new
Name of New Registered Agent:	Jackh	40-Ccs	anti		<del></del> -
New Registered Office Address:	<u> 1050</u>	SUNSC. Enter Florid	ta sircoi address	rpt-700	<del>}</del>
	South	Pasac	Lenca, Florida_	337 C	27_

## 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 adde or removed from our records:

MGR = Manager

AMBR = Authorized Member Title <u>Name</u> Address Type of Action Tachi (risanti 7050 Junset Dr. Apt 709 - Add AMBR South Pasadena, FL 33707 Remove ☐ Change 7050 Sunset Dr. Apt 709 WAdd AMBR Jacklyn Crisanti South Pasadena, FL 33707 - Remove ☐ Change □ Add ☐ Remove Change □ Add ☐ Remove \_□ Change \_□ Add ☐ Remove ☐ Change □ Add ☐ Remove

☐ Change

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ffective	e date, if other than the date of filing:
an effect ote:   If	tive 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 605.020 the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed a at a effective date on the Department of State's records.
	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the day after the record is filed.
ated	Feb 12, 19
	ACILIAN DOCAL
	Sherifture of a member or authorized representative of a member
	Cockling Coscot

Page 3 of 3

Filing Fee: \$25.00