## 119000137597

(Requestor's Name)
(Address)
(Address)
. (************************************
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
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## COVER LETTER ,

TO:		gistration Se ision of Cor			
SHR	JECT:	JLSI Enterp	orises, LLC		
300	ner.		Name of Lim	ited Liability Company	
The e	enclosec	i Articles of	Amendment and fee(s) are sub	mitted for filing.	
Pleas	e return	all correspo	ondence concerning this matter	to the following:	
			Justin Smith		
				Name of Person	<del></del>
			2315 Beach Drive SE	Firm/Company	
			St Petersburg, FL 33705	Address	<del></del>
			justinłsmith1@yahoo.com	City/State and Zip Code	<del></del>
				to be used for future annual re	port notification)
For fi	urther ii	nformation e	oncerning this matter, please co	all:	
Justin	n Smith		f Person	727 <del>202 (</del> at ()	278.6905
		Name o	rreison	Area Code	Daytime Telephone Number
Enclo	sed is a	check for th	ne following amount:		
<b>■</b> \$	25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	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

JLSI Enterprises, LLC		
( <u>Name of the Limited Liah</u> (A Flori	ility Company as it now appears on our re ida Limited Liability Company)	cords.)
The Articles of Organization for this Limited Liability Florida document number 119000137597	Company were filed on May 22nd 20	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited liability company here:	
The new name must be distinguishable and contain the words "L	imited Liability Company," the designation "	LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADL	DRESS)	TAICO
Enter new mailing address, if applicable:		ASSSET - F
(Muiling address MAY BE A POST OFFICE BOX)	<del></del>	3
B. If amending the registered agent and/or reg		ords, enter the name of the i
registered agent and/or the new registered office ad	iuress nere:	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street a.	
	City	, Florida
	•	•

## 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 bein or removed from our records:

MGR = Manager

AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Act
MGR	Justin L. Smith	2315 Beach Drive SE St St Petersburg FL 33705	Add
			☐ Remove
		Change Justin Smith's Title to MGR	
			Change
		<del></del>	
		<del> </del>	Remove
			TE Gener 7
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Filing Fee: \$25.00