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TO:

Registration Section

Div	ision of Corpo	orations		
SUBJECT:	J&B Bowers,	LLC		
JUBBLETA		Name of Limit	ed Liability Company	
721 t	l Aminlan of A	and Social and social and sub-	nisted for filing	
The enclosed	Articles of Al	mendment and fee(s) are subm	inted for tring.	
Please return	all correspond	lence concerning this matter to	o the following:	
		James N. Powell		
			Name of Person	
		Powell, Carney, Maller, P.A	۸.	
			Firm/Company	
		200 Central Avenue, Suite	1210	
			Address	
		St. Petersburg, Florida 3370)1	
			City/State and Zip Code	
		jnpowell@powellcarneylaw.	com	
		E-mail address: (to	be used for future annual report notifi	cation)
For further in	iformation con	cerning this matter, please cal	II:	
James N. Po	well		at ()	
	Name of F	erson	Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling 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)

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

ARTICLES OF ORGANIZATION **OF**

FILED

J&B Bowers, LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

ZUI AUG 12 P 2: 59

The Articles of Organization for this Limited Liability Compa	any were filed on July	TALLAHASSEE, FLORIDA
Florida document number L19000186387		TACEATIASSEE, TEORIDA
This amendment is submitted to amend the following:		:
A. If amending name, enter the new name of the limited l	iability company her	<u>e</u> :
The new name must be distinguishable and contain the words "Limited L	iability Company," the des	signation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	2	
		
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered	i office address on	our records, enter the name of the no
registered agent and/or the new registered office address		, <u> </u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florid	la street address
		, Florida
	•	Zip Code
New Registered Agent's Signature, if changing Registered Age	.— <u>—</u>	
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compl		
accept the obligations of my position as registered agent		
being filed to merely reflect a change in the registered off company has been notified in writing of this change.	ice address, I hereby	confirm that the limited liability
company nas 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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR Brenda G. Bowers	Brenda G. Bowers	2220 Coffee Pot Blvd. NE	Add
		St. Petersburg, Florida 33704	Remove
			☐ Change
MGR John Bowers	John Bowers	2220 Coffee Pot Blvd. NE	□ Add
		St. Petersburg, Florida 33704	■ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Remove
			☐ Change
		□ Add	
			□ Remove
			☐ Change
			Add
			□ Remove
			Change

1), If amending	any other information, enter change(s) here: (Attach additional sheets, if necessary.)
	
-	
	
(If an effective d <u>Note:</u> If the o	te, if other than the date of filing:
	pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: day after the record is filed.
Dated	August D. 2019
	Angust D. 2019.
- -	Signature of a member or authorized representative of a member
Ja	mes N. Powell, Esq.
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00