

119000228785

\_\_\_\_\_  
(Requestor's Name)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(Address)

\_\_\_\_\_  
(City/State/Zip/Phone #)

PICK-UP     WAIT     MAIL

10/13/20--01012--010    \*\*25.00

\_\_\_\_\_  
(Business Entity Name)

\_\_\_\_\_  
(Document Number)

Certified Copies \_\_\_\_\_ Certificates of Status \_\_\_\_\_

Special Instructions to Filing Officer:

STATE OF MARYLAND  
DEPARTMENT OF STATE  
CORPORATIONS  
20 OCT 13 AM 10:40

Office Use Only

Amend

# COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: Jim-DM, LLC  
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:

Heather Bagnuolo

Name of Person

Jim-DM LLC

Firm/Company

6252 Commercial Way #110

Address

Spring Hill FL 34613

City/State and Zip Code

Admin @ SCgrill.com

E-mail address: (to be used for future annual report notification)

FLORIDA DEPARTMENT OF STATE  
DIVISION OF CORPORATIONS  
28 OCT 13 AM 10:40

For further information concerning this matter, please call:

Heather Bagnuolo

Name of Person

at (727) 807-1010

Area Code

Daytime Telephone Number

Enclosed is a check for the following amount:

\$25.00 Filing 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 Address:**

Registration Section  
Division of Corporations  
The Centre of Tallahassee  
2415 N. Monroe Street, Suite 810  
Tallahassee, FL 32303

ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF

Jim-DN LLC

(Name of the Limited Liability Company as it now appears on our records.)  
(A Florida Limited Liability Company)

20 OCT 13 AM 10:40  
FILED STATE  
DIVISION OF  
SPECIALITY OF CORPORATION

The Articles of Organization for this Limited Liability Company were filed on 9/3/2019 and assigned Florida document number L19000228785

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited 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 ADDRESS)

6252 Commercial Way  
# 110  
Spring Hill FL 34613

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

6252 Commercial Way  
# 110  
Spring Hill FL 34613

**B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:**

Name of New Registered Agent:

New Registered Office Address:

6252 Commercial Way #110  
Enter Florida street address  
Spring Hill City Florida Zip Code 34613

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**

**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)

(If an effective 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 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the record is filed.

Dated 10/9/2020

Heather Bagnus, MCR

Signature of a member or authorized representative of a member

Heather Bagnuolo, MGR  
Typed or printed name of signee

Typed or printed name of signee