## 121000012233

(Requestor's Name)	
(Address)	
(Address)	000373093720
(City/State/Zip/Phone #)	
PICK-UP WAIT MAIL	
(Business Entity Name)	10/20/2101022004 **25.00
(Document Number)	
Certified Copies Certificates of Status	
Special Instructions to Filing Officer:	
	7:57

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## **COVER LETTER**

TO:

Tallahassee, FL 32314

,	gistration Section vision of Corpor	rations		
SUBJECT:	JAX	REAL ESTAT	E PHOTO LLC	
30001201.		Name of Lim	ited Liability Company	
The encloses	d Articles of Art	nendment and fee(s) are sub	mitted for filing.	
Please return	n all corresponde	ence concerning this matter	to the following:	
		SEAN BUR	4885	
			Name of Person	
		TAX REAL	ESTATE PAOTO Firm/Company	
			Firm/Company	
		6052 BAR	TRAM VILLAGE DO	2
			Address	<del></del>
		TACKSONVILL	E,FL 32258	
		77.0	City/State and Zip Code	<del></del>
		SEAN () JA)	REALESTATE PHOTO, CON	
		<b>-</b>	to be used for future annual report notif	
For further i	nformation con	cerning this matter, please c	all:	
S	END BURG	-, 858	at (904) 501. 3	30-12
	Name of Po	erson	Area Code Daytimo	: Telephone Number
Enclosed is	a check for the t	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)
	niling Address:		Street Address:	
	egistration Sec		Registration Sec Division of Cor	
	vision of Cor O. Box 6327	porations	The Centre of T	•

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

· · · · · · · · · · · · · · · · · · ·	ite rioto Lieu	The state of the s	
( <u>Name of the Limited Liab</u> (A Flori	ility Company as it now appears of ida Limited Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Torida document number <u>L21ずゆまは122</u> 33		1/4/2021	_ and assigned
his amendment is submitted to amend the following:			
A. If amending name, enter the new name of the lin	mited liability company here	<b>;</b> :	
The new name must be distinguishable and contain the words "1.	imited Liability Company," the desi	gnation "LLC" or the abbre	viation "L.L.C."
Enter new principal offices address, if applicable:			, <u> </u>
Principal office address MUST BE A STREET ADL	DRESS)		
Enter new mailing address, if applicable:  Mailing address MAY BE A POST OFFICE BOX)	<del></del>		
3. If amending the registered agent and/or register agent and/or the new registered office address here		ords, <u>enter the name c</u>	of the new regist
Name of New Registered Agent:		1991 <u>.</u>	
New Registered Office Address:			
	Enter Floride	a street address	
	City	, Florida	Zip Code
	Cuy		z.φ c.σαν

## 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 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 (ac) (3), 20 (A); 7: 57 Type of Action Address Title **Name** JACKSONVILLE, FL 32258 SEAD PATRICK BURGESS MGR \_\_\_\_\_ □Remove 6052 BARTRAMVILLAGE DR. DAdd

JACKSONVILLE, FL 32258 JELENA BREZJANOVIC MGR \_\_\_\_ □Remove \_\_\_\_\_ □ Remove

\_\_\_\_\_ 

Change

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ffective date, if other than the data an effective date is listed, the date must be ote: If the date inscreed in this block ocument's effective date on the Department.	be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 k does not meet the applicable statutory filing requirements, this date will not be listed as
is filed.	date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
10/0/2021	
ated /0/18/2021	<del></del>
ated 10/18/2021	gnature of a member or authorized representative of a member