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TO:

Registration Section

Division of Corporations

Tallahassee, FL 32314

P.O. Box 6327

Division of Corporations JVC PROPERTIES II 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: **Bradleg Gies** Name of Person The Law Office of Bradley Gies P.A. Firm/Company 1983 PGA Blvd Ste. 102 Address Palm Beach Gardens, FL 33408 City/State and Zip Code Bradgies@gieslaw.com E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: **Bradley Gies** Daytime Telephone Number Name of Person Enclosed is a check for the following amount: ■ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee, Certificate of Status Certificate of Status & Certified Copy (additional copy is enclosed) Certified Copy (additional copy is enclosed) **Mailing Address:** Street Address: Registration Section Registration Section

Division of Corporations
The Centre of Tallahassee

Tallahassee, FL 32303

2415 N. Monroe Street, Suite 810

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JVC PROPERTIES II LLC (Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) The Articles of Organization for this Limited Liability Company were filed on ______ _____ and assigned Florida document number 1.21000426789 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: JBC Properties II LLC 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) Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX) 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:

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.

City

Enter Florida street address

_, Florida

Zip Code

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
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ffective date, if other than the date an effective date is listed, the date must be store: If the date inserted in this block	e specific and cannot be prior to	o date of filing or more than 90 d	ays after filing.) Pursuant to 605.02
locument's effective date on the Depa	irtment of State's records.	ore standary ming requirement	,
record specifies a delayed effective d	ate, but not an effective tir	ne, at 12:01 a.m. on the earlie	er of: (b) The 90th day after the
d is filed.			
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Dated 10/01	gnature of a member or author	rized representative of a membe	r

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