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COVER LETTER

TO: Registration Section Division of Corporations	
SUBJECT: JOHN TEMPLETON JR. 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:	
JOHN R. Templeton JR.	
Signature Group Electronics	
+51101th 151 107th Ave Stc 13	
Treasure Island, FL 33706 City/State and Zip Code	
E-mail address: (to be used for future annual report notification)	
For further information concerning this matter, please call:	
Janu Templeton J2 at (727) 804.3975 Name of Person Area Code Daytime Telephone Number	_
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	
S25.00 Filing Fee S30.00 Filing Fee & S55.00 Filing Fee & S60.00 Filing Fee & Certificate of Status Certified Copy (additional copy is enclosed) Certified Copy (additional copy is	tatus &

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

JOHN TEMPLETON JR	a. LLC
(Name of the Limited Liability Comp (A Florida Limited	any as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company	
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lial Signature Group Dectronics	bility company here: Company here: Compan
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	U/A
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	u/a
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, enter the name of the new registered
Name of New Registered Agent: New Registered Office Address: \[\begin{align*}	O A O
	Enter Florida street address , Florida Zip Code

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.

N/A

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
			□Add
			□Remove
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			□Add
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If an effi Note:	ve date, if other than the date of filing:
e recor rd is fil	d 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 ed.
Dated	December 28 , 2021
	Signature of a member or authorized representative of a member
	John R. Templetow In Typed or printed name of signee

Filing Fee: \$25.00