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## **COVER LETTER**

TO:

TO: Registration Division of C					
SUBJECT: JMB Gainesville Regidential Services LLC Name of Limited Liability Company					
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.			
Please return all corres	pondence concerning this matter	to the following:			
	Je	SSICA Boloter Name of Person	_		
		Firm/Company	_		
		NF Oak Hill Bd	-		
		Pinetta FL 32350 City/State and Zip Code  Squetiva annual report notification)	0		
	E-mail address (	to be used for future annual report negitication)	oM		
For further information	econcerning this matter, please c	all:			
Je de Name	of Person	at (229) 563 303° Area Code Daytime Telephone Number	<u>1</u>		
Enclosed is a check for	r the following amount:				
□ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certifie	ate of Status &		
Mailing Addi Registration Division of P.O. Box 6 Tallahassee	n Section Corporations 327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FILED

JMB Gainesville B	esidentia	2924 SEE-5-181-6-42 LL3
( <u>Name of the Limited Liability Compan</u> (A Florida Limited L	is as it now appears on ou liability Company)	AMANCINE OF STATE
The Articles of Organization for this Limited Liability Company v	were filed on $\frac{7/2}{}$	6/24 and assigned
Florida document number 124000 3 3 1990	. 1	(
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liabil	lity company here:	
The new name must be distinguishable and contain the words "Limited Liability and Contain the Words" and Contain the Words "Limited Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words" and Contain the Words "Liability and Contain the Words	ty Company," the designation	on "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		
Enter new maifing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office adapta and/or the new registered office address here:	ddress on our records	enter the name of the new registered
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	
	City	, Florida Zip Code
New Registered Agent's Signature, if changing Registered Agent:	•	,
I hereby accept the appointment as registered agent and agre provisions of all statutes relative to the proper and complete p accept the obligations of my position as registered agent as pu- being filed to merely reflect a change in the registered office of	performance of my du rovided for in Chapte.	ties, and I am familiar with and v 605, F.S. Or, if this document is

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

Title	<u>Name</u>	Address	Type of Action
AMBR	Michael Bolste	er 1042 NE Oak Hill 1	BO XAdd
		Pinetta FL 323	50 □Remove
			□Change
MGR	Jessica Bolster	1042 NE Clark Hi	
		Pinetta FL 323	50 Remove
			iXChange
		<del></del>	□Add
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			□Add
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If an effe <u>Note:</u>	ye date, if other than the date of filing:
e record rd is file	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 d.
Dated _	September 9. 2024.  Signature of a member or authorized representative of a member
	Signature of a member or authorized representative of a member  Jessica Bolster  Typed or printed name of signee

Filing Fee: \$25.00