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SECRETARY OF STATE AND LAHASSEE, FLORIDA

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M. THOMAS

DEC -1 2009

EXAMINER

COVER LETTER

TO: Registration S Division of Co					
SUBJECT:	J.J. ST	ARFIND, L.L.C.			
		ited Liability Company			
The enclosed Articles o	f Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	oondence concerning this matte	r to the following:			
Donald R. Tescher, Esq.					
		Name of Person			
	TES	TESCHER & SPALLINA, P.A.			
		Firm/Company			
	4855 ⁻	4855 Technology Way, Suite 720			
		Address			
Boca Raton, FL 33431 City/State and Zip Code				2009 NOV 30 PH 1: 09 SECRETARY OF STATE TALLAHASSEE, FLORID	
				See See	
		ther@tescherspallina.com	Sention)	30 TAR	T
East Guithas in Commution	concerning this matter, please	·	reaction)	PER PR	TITO
For further information	concerning this matter, please	can.		FLC ST	المنا
	R. Tescher, Esq.	at (_561)	997 7008		
Name	of Person	Area Code & Daytim	e 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	l) Certified	te of Status &	d)
MAILING ADDRESS:		STREET/COURI	ER ADDRESS:		

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314 Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J.J. S1/	ARFIND, L.L.C.			
(<u>Name of the Limited Liability C</u> (A Florida Lin	nited Liability Company)	rs on our records.)		
The Articles of Organization for this Limited Liability Cor	mpany were filed on	12/11/1998	and assigned	
Florida document number L9800003140				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limite	ed liability company her	<u>re</u> :		
The new name must be distinguishable and end with the words "L.L.C."	s "Limited Liability Compa	any," the designation "	LLC" or the abbreviation	
Enter new principal offices address, if applicable:			部 三	
(Principal office address MUST BE A STREET ADDRE	<u></u>		ASSE T	
			TO B	
Enter new mailing address, if applicable:			1:09	
(Mailing address MAY BE A POST OFFICE BOX)			.h	
B. If amending the registered agent and/or register registered agent and/or the new registered office addre		our records, <u>enter</u>	the name of the new	
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
-	<i>a</i> :	, Florida	7: 0 1	
	City		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 608, 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 the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager

MGRM = Managing Member Title Title <u>Name</u> <u>Address</u> Type of Action MGR DONALD R. TESCHER, ES 4855 Technology Way, Suite 720 ☑ Add Boca Raton, FL 33431 Remove LEO MARTIN MGR 6465 SW 84 Street ☐ Add Remove Miami, FL 33143 ☐ Add Remove _ Add Remove □Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary) Signature of a member or authorized representative of a member Donald R. Tescher, Esq. Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00