L98000003284

(Requestor's Name)
(Address)
(Addiess)
(Address)
(City/State/Zip/Phone #)
(Sityrotate/21pr Horie #)
PICK-UP WAIT MAIL
(Business Entity Name)
٠.
(Document Number)
Cartified Caulas Cartificates of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
, special monatorial and a second
T
<u> </u>

Office Use Only

B. KOHR

OCT 2 6 2011

EXAMINER



600213506106

600213506106 10/25/11--01035--018 **25.00

11 OCT 25 AM 9: 45

SECRETARY OF STATE SECRETARY OF STATE

COVER LETTER

TO:	Registration S Division of Co		,	•
SUBJE	Ст.	JFH CON	STRUCTION LC	
<i>ЭО</i> ВЭЕ			ted Liability Company	
The end	closed Articles of	f Amendment and fee(s) are sub	omitted for filing.	DIVISE OF SECTION OF S
Please r	return all corresp	ondence concerning this matter	to the following:	NUSION OT 25 AM 9: 49
			JAMES HAVEN	· · · · · · · · · · · · · · · · · · ·
 			Name of Person	9.
JFH CONSTRUCTION LC				* 0
			Firm/Company	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
		24	11 52ND AVENUE NE	
			Address	
			NAPLES FL 34120	
		LEALIAN	City/State and Zip Code	
		E-mail address: (1	VEN@EMBARQMAIL.COM to be used for future annual report notific	cation)
For furt	her information	concerning this matter, please c	ali:	
		NDREA FOX	at (—)	118-1040
	Name	of Person	Area Code & Daytime	Telephone Number
Enclose	ed is a check for	the following amount:		
[] \$ 25.	00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	\$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JFH CONSTR	UCTION LC		% विस्ति
(<u>Name of the Limited Liability Compar</u> (A Florida Limited L	ny as it now appear liability Company)	s on our records.)	and assisted
The Articles of Organization for this Limited Liability Company Florida document number L9800003284	were filed on	12/15/1998	and assigned &
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company her	<u>e</u> :	
The new name must be distinguishable and end with the words "Limi"L.L.C."	ted Liability Compa	ny," the designation "L	LC" or the abbreviation
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)			And the state of t
B. If amending the registered agent and/or registered off registered agent and/or the new registered office address here		ur records, <u>enter tl</u>	he name of the new
Name of New Registered Agent:			
New Registered Office Address:	Ent	er Florida street addr	ress
		Florida	

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.

City

Zip Code

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

<u>Title</u>	<u>Name</u>	Address	Type of Action		
MGR	STEVEN HAVEN	8412 ALOHA ROAD FORT MYERS FL 33967	✓ Add Remove		
			Add Remove		
			Add Remove		
	 		Add Remove		
. , <u> </u>		-	Add Remove		
			Add Remove		
D. If amen	nding any other information, o	enter change(s) here: (Attach additional sheets, if neces	ssary.)		
	OCTOBER 20	2011			
Dated	OCTOBER 20				
	Signature of a member or authorized representative of a member				
					
		Typed or printed name of signee			

Page 2 of 2

Filing Fee: \$25.00