L99000004418

(Re	equestor's Name)			
(Address)				
(Ac	ddress)			
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SECRETARY OF STATE DIVISION OF CORPORATIONS

T. HAMPTON FEB 1 2 2010

EXAMINER

COVER LETTER

TO: Registration S Division of Co	ection rporations		
SUBJECT:	TPM Prop Name of Limi	ecties LLC ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sul	omitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	Pedro	Medina Sr. Name of Person	
		Firm/Company	
	970 Sw	Address	
	Plantatio	City/State and Zip Code	
	E-mail address: (d ina @ Kpmg. com to be used for future annual report notifica	tion) .
For further information	concerning this matter, please o	eall:	
Pedro Name o	Medina Jr. of Person	at (<u>954</u>) <u>388 - 465</u> Area Code & Daytime T	clephone Number
Enclosed is a check for t	he 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



FLORIDA DEPARTMENT OF STATE Division of Corporations

RECEIVED

10 FEB 11 PM 4:00

SECRETARY OF STATE TALLAHASSEE, FLORIDA

January 8, 2010

PEDRO MEDINA SR 970 SW 68TH AVE PLANTATION, FL 33317

SUBJECT: JPM PROPERTIES, LLC

Ref. Number: L99000004418

We have received your document for JPM PROPERTIES, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

Section 608.407, Florida Statutes, requires the document(s) to be signed by a member or by the authorized representative of a member.

Please return the corrected original and one copy of your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6855.

Letter Number: 110A00000649

Tammy Hampton Regulatory Specialist II Registration/Qualification Section

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JPM Prope			
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)		
	_ <u> </u>		
The Articles of Organization for this Limited Liability Company	were filed on 1721 1999 and assigned 5		
Florida document number <u>L 99 00000 4418</u>			
•			
This amendment is submitted to amend the following:	* ***********************************		
A. If amending name, enter the new name of the limited liab	SILITY company horse		
1. If amending name, enter the new name of the named hab	Sinty company nere:		
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company," the designation "LLC" or the abbreviation		
Enter new principal offices address, if applicable:	_ 970 SW 68th Avenue		
(Principal office address MUST BE A STREET ADDRESS)	Plantation FC 33317		
Enter new mailing address, if applicable:	970 Sw 68th Avenue		
(Mailing address MAY BE A POST OFFICE BOX)	Plantation Fr 33317		
Indiang dadress MAT BE ATOST OFFICE BOA)	1100terum +		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here	flice address on our records, <u>enter the name of the new</u>		
Name of New Registered Agent:	Pedro Medina Sr.		
New Registered Office Address:	970 SW 68th Avenue Enter Florida street address		
Plants turn Blowida 32217			
	City , Florida 33317 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 = Man MGRM = M	lager anaging Member		
<u>Title</u>	Name	Address	Type of Action
HGRM	Pedro Medine Ir	5204 Sw 87th Hvenue Cooper City Fr 33328	Add Remove
MGEM	Joel Medina	Sport SW 87th Avenue Cooper City FL 33328	Add Remove
	· · · /N		Add Remove
· ·	<u> </u>		Add Remove
			Add Remove
			Add Remove
D. If amend	ing any other information, enter changes	ge(s) here: (Attach additional sheets, if necessary.)	SECRETARY OF STATE DIVISION OF CORPORATIONS 10 FEB 11 AM 8: 40
	Pedr	er or authorized representative of a member O Me dinn. d or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00