(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Na	me)
(Do	cument Number	<del></del>
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	
	Vo	boxchra





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## COVER LETTER

TO: Amendment Section

Division of Corporations

NAME OF CORPOR	J D MGMNT CO.	, INC			
DOCUMENT NUME	P00000115031 BER:				
The enclosed Articles	of Amendment and fee are su	bmitted for filing.			
Please return all corres	spondence concerning this ma	tter to the following:			
	KARI LE				
	J D MGMNT CO.,INC	Name of Contact Perso	n		
	51 S 3RD ST	Firm/ Company			
	Address  JACKSONVILLE BEACH, FL 32250				
		City/ State and Zip Cod	e		
AP.	JDMGMTCO@US.STORE	ES.MCD.COM			
	E-mail address: (	to be used for future annua	l report notification)		
For further information	n concerning this matter, pleas	se call:			
KARI LE		904 at (	249-4771		
Name	of Contact Person		de & Daytime Telephone Number		
Enclosed is a check fo	r the following amount made	payable to the Florida Dep	artment of State:		
□ \$35 Filing Fee	ॼ\$43.75 Filing Fee & Certificate of Status	□\$43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	□\$52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)		
Ame Divi P.O.	ling Address endment Section sion of Corporations Box 6327	Ameno Divisio Cliftor	Address Iment Section on of Corporations Building Executive Center Circle		

Tallahassee, FL 32301



## FLORIDA DEPARTMENT OF STATE Division of Corporations

November 30, 2018

KARI LE 51 S 3RD ST JACKSONVILLE BEACH, FL 32250

SUBJECT: J D MGMNT CO., INC. Ref. Number: P00000115031

We have received your document for J D MGMNT CO., INC. and your check(s) totaling \$43.75. However, the enclosed document has not been filed and is being returned for the following correction(s):

Please check the appropriate box on the amendment form regarding the adoption of the amendment(s).

Please return 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) 245-6050.

Rebekah White Regulatory Specialist II

Letter Number: 918A00024494

ECEIVED

## Articles of Amendment to Articles of Incorporation of

FILED

2018 DEC 14 PM 7:26

SECTION STATE

J D MGMNT CO., INC.

		<u> </u>
(Name of Corporation as curr 200000115031	ently filed with the Florida Dept. of State)	TALLAHASSEE, FL
(Document Nur	nber of Corporation (if known)	
tursuant to the provisions of section 607.1006.	, Florida Statutes, this corporation adopts the following	owing amendment(s) to its Articles
. If amending name, enter the new name of	f the corporation:	
I/A		The new
'Corp.," "Inc.," or Co.," or the designation word "chartered," "professional association,"		
<ol> <li>Enter new principal office address, if app Principal office address <u>MUST BE A STREE</u></li> </ol>		
S. Datas was madilian address if anylimble		<del></del>
C. Enter new mailing address, if applicable (Mailing address MAY BE A POST OFFI		
). If amending the registered agent and/or new registered agent and/or the new regi	registered office address in Florida, enter the naistered office address:	ame of the
Name of New Registered Agent N/A		_
	(Florida street address)	_
New Registered Office Address:	, Florid	ła
New Registered Office Address.	(City)	(Zip Code)
New Registered Agent's Signature, if changi		
the after an expense of the same transfer and	agent. I am familiar with and accept the obligation	ane of the position

Signature of New Registered Agent, if changing

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change	<u>PT</u>	John Do	<u>e</u>	
X Remove	<u>V</u>	Mike Jo	<u>nes</u>	
X Add	<u>sv</u>	Sally Sn	<u>nith</u>	
Type of Action (Check One)	<u>Title</u> S		Name ADAM GUSKE	<u>Addres</u> s 51 S 3RD ST
1) Change X Add Remove	<u> </u>	_	ADAM GUSKE	JACKSONVILLE BEACH, FL 32250
2) Change Add Remove		_		
3 ) Change Add Remove		_		
4) Change Add Remove		-		
5) Change Add		<del></del>		
Remove 6) Change Add		-		
Remove				

G:	If amending or adding additional Articles, enter change(s) here:
	(Attach additional sheets, if necessary). (Be specific)
N/A	
	<u></u>
_	
	·· <del>·</del>
н.	f an amendment provides for an exchange, reclassification, or cancellation of issued shares,
	provisions for implementing the amendment if not contained in the amendment itself:
	(if not applicable, indicate N/A)
N/A	
_	
_	

The date of each amendment(s) addate this document was signed.	, if other than the	
Effective date <u>if applicable</u> :		
<u></u>	(no more than 90 days after amendment file date)	
Adoption of Amendment(s)	(CHECK ONE)	
☐ The amendment(s) was/were adop by the shareholders was/were suf	ited by the shareholders. The number of votes cast for the amendment(s) ficient for approval.	
	oved by the shareholders through voting groups. The following statement each voting group entitled to vote separately on the amendment(s):	
	or the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
The amendment(s) was/were adop action was not required.	ted by the board of directors without shareholder action and shareholder	
☐ The amendment(s) was/were adop action was not required.	ted by the incorporators without shareholder action and shareholder	
Dated11/20/	2018	
	de	
Signature		
selected	rector, president or other officer – if directors or officers have not been , by an incorporator – if in the hands of a receiver, trustee, or other court ed fiduciary by that fiduciary)	
	JACQUES GUSKE	
-	(Typed or printed name of person signing)	
F	PRESIDENT	
-	(Title of person signing)	

. . .