

L060000067207

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

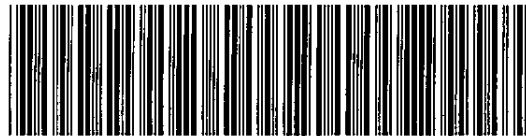
Special Instructions to Filing Officer:

L. SELLERS

APR 30 2008

EXAMINER

Office Use Only



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04/14/08--01022--016 **25.00

2008 APR 29 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JMJ Capital Group, LLC
(Name of Limited Liability Company)

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Joel Garcia
(Name of Person)
JMJ Capital Group, LLC
(Firm/Company)
12051 SW 131 Avenue
(Address)
Miami, FL 33186
(City/State and Zip Code)

For further information concerning this matter, please call:

Joel Garcia at (786) 293-8216
(Name of Person) (Area Code & Daytime 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) \$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

April 7, 2008

JOEL GARCIA
12051 SW 131 AVENUE
MIAMI, FL 33186

SUBJECT: JMJ CAPITAL GROUP LLC
Ref. Number: L06000067207

We have received your document for JMJ CAPITAL GROUP LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 408A00020273



PO Box 96023
Miami, FL 33296-023
Thursday, April 3, 2008

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

Dear Division of Corporations,

We recently mailed a request for change of registered office address without the \$25 filing fee. Enclosed is the \$25 filing fee for the request for change of registered office address we mailed on April 1, 2008 for JMJ Capital Group, LLC. Our assigned Florida document number is L06000067207, and the Articles of Organization for this Limited Liability Company were filed on July 5, 2006. We apologize for the inconvenience.

Should you have any questions, please contact us at the below information.
Thank you for your help.

Sincerely,

A handwritten signature in cursive script that reads "Megumi Koderu".

Megumi Koderu
Operations Specialist
JMJ Capital Group, LLC
Office: 786-293-8216
Fax: 1-800-779-0203
Email: megumi@jmcapital.com



FLORIDA DEPARTMENT OF STATE
Division of Corporations

April 17, 2008

JOEL GARCIA
12051 SW 131 AVENUE
MIAMI, FL 33186

SUBJECT: JMJ CAPITAL GROUP LLC
Ref. Number: L06000067207

We have received your document for JMJ CAPITAL GROUP 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):

The money for the amendment has now been processed however the amendment that was returned to accompany the filing fee was not received in this office. Please return it or complete the enclosed amendment form.

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) 245-6967.

Leslie Sellers
Regulatory Specialist II

Letter Number: 408A00023078

ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF

JMJ Capital Group, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on July 5, 2006 and assigned Florida document number LO6000067207.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent:

New Registered Office Address:

12051 SW 131 Avenue

(Enter Florida street address)

Miami

(City)

, Florida

33186

(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)

FILED
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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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>	<u>Address</u>	<u>Type of Action</u>
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove
_____	_____	_____	<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Dated April 22, 2008

Joel Garcia
Signature of a member or authorized representative of a member

Joel Garcia
Typed or printed name of signee

2008 APR 29 PM 1:09
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

FILED