

(Re	equestor's Name)	
(Ac	ldress)	
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(Ci	ty/State/Zip/Phone	: #)
PICK-UP	WAIT	MAIL
(Bı	usiness Entity Nan	ne)
. (Do	ocument Number)	
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SECLETARY OF STATE

MAR 2 3 2016 BRUCE

COVER LETTER

TO: Registration Sec Division of Corp				
	ONSULTANTS, LLC			
SUBJECT:	Name of Lim	ited Liability Company		
The enclosed Articles of A	Amendment and fee(s) are sub-	mitted for filing.		
Please return all correspon	ndence concerning this matter	to the following:		
	Christopher Herrera			
		Name of Person		
	JAGUAR CONSULTANT	s, lic		
		Firm/Company		
	3305 Rice Street			
	·	Address		
	Miami, Fl.33133			
	moo.llcmg@kqrcugs[City/State and Zip Code		
		to be used for future annual report notif	neation) 7	
For further information of	oncerning this matter, please c	all:	LCAET B MAR	1
Christopher Herrera		305 742-4368	924 ~	ings)
Name o	l Person		e Telephone Number	
			Con	ل
Enclosed is a check for the	e following amount:		29 29	
S25,00 Filing Fee	S30.00 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)	
Registr Divisic P.O. B	ING ADDRESS: ration Section on of Corporations ox 6327 assec, FL 32314	STREET/COURI Registration Section Division of Corpor Clifton Building 2661 Executive Co Tallahassee, FL 32	on rations :nter Circle	

TO ARTICLES OF ORGANIZATION OF

JAGUAR CONSULTANTS, LLC		
(Name of the Limited Liability Co (A Florida Lim	empany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp Florida document number L16000026771	nany were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	linhility company here:	
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or t	the abbreviation "L.I.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS	5)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)	#	
The transmitted the mediate of another median median		
B. If amending the registered agent and/or registered orgent and/or the new registered office address		nter the name of the new
		7. 2. 2.
Name of New Registered Agent:		
New Registered Office Address:		
HEW HERBIETER OTHER MURIES.	Enser Florida street address	SE N
	, Florid	
	City	Zip Code
New Registered Agent's Signature, if changing Registered Ar	zent:	ORANIE 2
I hereby accept the appointment as registered agent and provisions of all statutes relative to the proper and compacept the obligations of my position as registered agen being filed to merely reflect a change in the registered a company has been notified in writing of this change.	plete performance of my duties, and I t as provided for in Chapter 605, F.S	ragree to comply with the am familiar with and . Or, if this document is

Page 1 of 3

If Changing Registered Agent, Signature of New Registered Agent

or removed from our records:

MGR = Manager

AMBR =	Authorized	Member

Title	Name	Address	Type of Action
AMBR	JAGUAR PT, LLC	3400 SW 27TH AVE	5
		APT 1504	
		AT LOW	Remove
		MIAMI, FL33133	□ Change
MGR	JAGUAR THERAPEUTICS LLC	3305 Rice Street	■ Add
		MIAMI, FL 33133	
			Remove
			C) Change
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lote: If the date inserted in this block does not meet the applicable statutory tiling requirement	s, this date w	rill not be	listed as
ocument's effective date on the Department of State's records.			
e record specifies a delayed effective date, but not an effective time, at 12:	:01 a.m. o	n the ea	ırller ol
The 90th day after the record is filed.			
MADOU 9 2016			
MARCH 8 2016			
Dated		 -	
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Filing Fee: \$25.00