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DIVISION OF CORPORATION

IMR 2 8 2013

T. H. A. S.

## **COVER LETTER**

Division of Corp	porations		
SUBJECT:	JED Property,	LLC	
MODILECT.	Name of Limit	ted 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:	
	Jaime	Rodriguez	
		Name of Person	
	JED Pro	operty, LLC	
		Firm/Company	
	1888 N.	W. 7 Street	
	·	Address	
·	Miami,	F1. 33125	
		City/State and Zip Code	
		74@aol.com	
	E-mail address: (t	o be used for future annual report notificati	on)
For further information co	oncerning this matter, please of	all:	
Jaime Rodri	guez	305 643-3909	
Name of	i Person	Area Code & Daytime Te	elephone Number
Enclosed is a check for th	ne following amount:		
XX S25.00 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:

TO:

Registration Section

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

JED Property, LLC	٥	
( <u>Name of the Limited Liabilit</u> (A Florida	ty Company as it now appears on Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability of Florida document numberL0400054260  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the line.	Company were filed on <i>Jvj</i>	y 21,2004 and assigned DIVISION OF CORPUT OF CORPUT OF PH
The new name must be distinguishable and end with the wo	ords "Limited Liability Company."	<u> </u>
"L.L.C."		SWO
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADD	(RESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or regi registered agent and/or the new registered office ad-		records, enter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter F	lorida street address
		, Florida
	City	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 = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	Graciela Rodriguez	1888 N.W. 7 Street	XXX Add
		Miami, Fl. 33125	Remove
			Add
			Remove
<u> </u>			Add DIVISION OF RETURN AR 2
			SECRETARY OF STATE STATE OF STATE OF CORPORATIONS OF STATE OF STAT
			Add

). If amen	ding any other information	n, enter change(s) here: (Attach additional sheets, if necessary.)
*		
***		
ated	March 22	2013
	Sann	mign
	Signat	ure of a thember or authorized representative of a member  Jaime Rodriguez
		Typed or printed name of sumee

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Filing Fee: \$25.00

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