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## **COVER LETTER**

	tion Section of Corporations					
SUBJECT:	OJ	JEDA MANAGEM	ENT, LLC			
Boboler.		Name of Limited Liability				
		d fee(s) are submitted for fi	-			
			BOHATCH			
		Name	of Person			
	GUTTENMACHER, BOHATCH & PENARANDA, P.A.				2	
		Firm/Company				1400
		7301 SW 57th Court, Suite 560			2012 SEP -4 SECRETARY (	-
		Au	uress		<b>開</b> 星 <b>P</b>	TI II
		South Miami, FL 33143  City/State and Zip Code				
		·	axlaw.com			
		-mail address: (to be used for	future annual report notificati	on)		
For further inform	ation concerning this n	natter, please call:				
	JOHN S. BOHAT	CHat (_		6-1040		
	Name of Person		Area Code & Daytime Te	elephone Number		
Enclosed is a che	ck for the following am	ount:				
<b>▼</b> \$25.00 Filing		ate of Status Cert	) Filing Fee & ified Copy itional copy is enclosed)	Certified	e of Status &	ed)
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314		ons	STREET/COURIER Registration Section Division of Corporatio Clifton Building 2661 Executive Cente Tallahassee, FL 32301	ons r Circle		

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	A MANAGEMENT, LL		
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now appea orida Limited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liabi Florida document number L04000893	• •	Dec. 13, 2004 and assigned	
This amendment is submitted to amend the followi	ng:		
A. If amending name, enter the new name of th	e limited liability company he	<u>re</u> :	
The new name must be distinguishable and end with the "L.L.C."  Enter new principal offices address, if applicable (Principal office address MUST BE A STREET A	e:	any," the designation "LLC" or the abbreviation	
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BO	<u></u>	PROPERTY OF THE PROPERTY OF TH	
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter the name of the new	
Name of New Registered Agent:			
New Registered Office Address:	E	nter Florida 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 Type of Action Title Name Address **MGRM** ROGELIO OJEDA, Trustee 50 Biscayne Blvd., Unit 1806 ☐ Add Remove Miami, FL\_33132 LUISA OJEDA, Trustee MGRM 50 Biscayne Blvd., Unit 1806 ☐ Add ∇ Remove Miami El 33132 MGR ROGELIO OJEDA 50 Biscavne Blvd., Unit 1806 ✓ Add ☐ Remove Miami\_FL\_33132 MGR LUISA OJEDA 50 Biscavne Blvd., Unit 1806. Miami, FL 33132 MARIA J. MARTINEZ MGR 50 Biscavne Blvd., Unit 1806 Miami, FL 33132 4P]Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) Dated \_\_\_ a member or authorized representative of a member Dieda Typed or printed name of signee

Page 2 of 2

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