# L05000045824

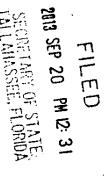
(Re	questor's Name)	,		
(Ad	dress)			
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(Cit	y/State/Zip/Phone	e #)		
PICK-UP	☐ WAIT	MAIL		
(Business Entity Name)				
(Do	cument Number)			
Certified Copies	_ Certificates	s of Status		
Special Instructions to Filing Officer:				





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# **COVER LETTER**

TO: Registration Sect Division of Corpo					
SUBJECT:	JGS	Florida LLC			
SUBJECT.		ted Liability Company	<del>.</del>		
The enclosed Articles of Articles	mendment and fec(s) are sub	omitted for filing.			
Please return all correspondence concerning this matter to the following:					
		Dora Acherman, Esq.			
		Name of Person			
	1	NR Investments, Inc.			
		Firm/Company	<del></del>		
	1111 Parl	c Centre Boulevard, Suite 4	50		
		Address			
	,	Miami, Florida 33169			
		City/State and Zip Code			
	dacher	man@nrinvestments.com			
	E-mail address: (t	to be used for future annual report notif	cation)		
For further information cor	ncerning this matter, please c	all:			
Dora	Acherman	at ( 305 )	6250949		
Name of I		Area Code & Daytim			
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	S60.00 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

FILED 2013 SEP 20 PM 12: 31

# ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION

OF

SECRETARY OF STATE. TALLAHASSEE, FLORIDA

	JGS Florida LLC			
( <u>Name of the Limited Lia</u> (A Flo	bility Company as it now apper orida Limited Liability Company)	ars on our records.)		
The Articles of Organization for this Limited Liabil	lity Company were filed on	May 09, 2005	and assigned	
Florida document numberL0500004582	4			
This amendment is submitted to amend the following	ng:			
A. If amending name, enter the new name of the	e limited liability company he	ere:		
The new name must be distinguishable and end with the "L.L.C."	e words "Limited Liability Comp	pany," the designation 'L	LC" or the abbreviation	
Enter new principal offices address, if applicable	e:			
(Principal office address MUST BE A STREET A	DDRESS)			
	<del> </del>			
Enter new mailing address, if applicable:				
(Mailing address MAY BE A POST OFFICE BO.	<u></u>			
B. If amending the registered agent and/or registered agent and/or the new registered office		our records, enter th	ne name of the new	
Name of New Registered Agent:				
	· · · · · · · · · · · · · · · · · · ·		-	
New Registered Office Address:	New Registered Office Address:  Enter 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

<u>Title</u>	Name	Address	Type of Action
MGRM	Jorge Alberto Saud	633 NW 167 Street Suite 301 North Miami Beach, FL 33162	_□ Add ☑ Remove
MGRM	Carlos Gustavo Saud	633 NW 167 Street Suite 301 North Miami Beach, FL 33162	_ Add ☑ Remove -
MGR	Nir Shoshani	1111 Park Centre Boulevard, Suite 450 Miami, Florida 33169	☑ Add ☐ Remove
<del></del>			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter change	(s) here: (Attach additional sheets, if necessary.)	-
<del></del>			- - -
Dated	J_+1-1	ImgAlouy	FILI 2013 SEP 20 SECRETARY TALLAHASSE
	CARLOS GUSTAVO SALID	JORGE ALBERTO SAL	

Page 2 of 2

Filing Fee: \$25.00