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SECRETARY OF STATE STATE SECRETARY OF CORPORATIONS

C. LEWIS

SEP 1 8 2012

EXAMINER

## **COVER LETTER**

TO:	Registration Section Division of Corpora	tions &	•	St. o. K			
SURJECT: CJM Industries LLC							
30001	Name of Limited Liability Company						
The en	closed Articles of Ame	ndment and fec(s) are sub	mitted for filing.				
Please	return all corresponden	ce concerning this matter	to the following:				
Crisanto Garzon							
	<del></del>	· •	Name of Person		<del></del>		
CJM Industries LLC							
Firm/Company							
859 SW 147 terrace							
	Address						
		<b>D</b>	skasta Dissa El Os	2007			
		Pen	nbroke Pines, FL 33 City/State and Zip Code	3027			
		Jonath	nan@garzonservice	s.com			
		E-mail address: (t	o be used for future annual i	report notification)	<del></del>		
For fur	ther information concer	rning this matter, please c	all:				
	Jonatha	ın Garzon	at ( 954 )	668-7040	)		
Name of Person			& Daytime Telephone I				
Enclos	ed is a check for the fol	llowing amount:					
\$25	5.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is	s enclosed) C	.00 Filing Fee. ertificate of Status & ertified Copy dditional copy is enclosed)		
MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327		Registrat	Γ/COURIER ADDRI tion Section of Corporations Ruilding	ESS:			

P.O. Box 6327 Tallahassee, FL 32314

Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF



CJM Industries LLC 2012 SEP 17 PM (1) 4.1

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company) 07/07/2005 The Articles of Organization for this Limited Liability Company were filed on and assigned L05000067062 Florida document number This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: N/A The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." 859 SW 147 Terrace Enter new principal offices address, if applicable: Pembroke Pines FI 33027 (Principal office address MUST BE A STREET ADDRESS) 859 SW 147 Terrace Enter new mailing address, if applicable: Pembroke Pines FI 33027 (Mailing address MAY BE A POST OFFICE BOX) 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: Enter Florida street address 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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager

MGRM = Managing Member

<u>Title</u> **Name Address** Type of Action N/A ☐ Add Remove N/A ☐ Add ☐ Remove N/A ☐ Add ☐ Remove N/A Add Remove N/A Add Remove N/A  $\square$ Add Remove D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.) N/A August 28th 2012 Dated Signature of a member or authorized representative of a member Crisanto Garzon Typed or printed name of signee

Page 2 of 2

Filing Fee: \$25.00