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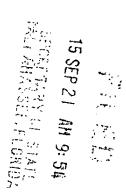
(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
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COVER LETTER

	distration Section of Corp			•
SUBJECT:	Joel-Evan L	LC		
GODGECT.		Name of Lim	ited Liability Company	
The enclosed	d Articles of A	Amendment and fee(s) are sub	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		Joel Reinstein, Esq.		
		7° william	Name of Person	
		Reinstein Family LLLP		
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		1200 N. Federal Highway,	#301	
			Address	
		Boca Raton, FL 33432		
		- · · · · · · · · · · · · · · · · · · ·	City/State and Zip Code	
		joel@reinsteinlaw.com	to be used for future annual report noti	(*
For further in	nformation co	e-man address: (-	ncación)
Joel Reinste		, p	561 393-6714	
	Name of	Person	at () Area Code Daytim	e Telephone Number
Enclosed is a	a check for th	e following amount:		
■ \$25.00 F	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:

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

JUEL-EVAN LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records.) ted Liability Company)	
The Articles of Organization for this Limited Liability Computer in Losent National Liability Computer National Liability		and assigned
his amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited L	iability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	0	<u> </u>
		≦ੁੱ ਲ
		% % €
Enter new mailing address, if applicable:		P 2
• • • • • • • • • • • • • • • • • • • •		
Mailing address MAY BE A POST OFFICE BOX)	W-IIII	77 mg == 179 mg
B. If amending the registered agent and/or registered		nter the name of the
egistered agent and/or the new registered office address	here:	
Name of New Registered Agent:		
New Registered Office Address:		
New Registered Office Address.	Enter Florida street address	
	. Florid	la.
	, Florid	Zin 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 605, 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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Reinstein Family LLLP	1200 N. Federal Highway, #301	
		Boca Raton, FL 33432	■ Remove
			☐ Change
AMBR	Reinstein Family LLLP	1200 N. Federal Highway, #301	Add
		Boca Raton, FL 33432	□ Remove
			Change
	***	-	Add
			□ Remove
			☐ Change
			Add
			☐ Remove
		· · · · · · · · · · · · · · · · · · ·	
		•	□ Remove
			Change
			Add
		****	☐ Remove
			□ Change

"ARTICLE VIII MEMBER MANAGED		
This Company shall be managed by the Members. The initial Member is Reinstein Family LLLP c/o Reinstein		
Family Corp., 1200 N. Federal Highway, #301, Boca Raton, FL 33432		
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	2 C	
	9 7	
ective date, if other than the date of filing: effective date is listed, the date must be specific and cannot be prior to date of filing	or more than 90 days after filing) Pursuant to 605 (
e: If the date inserted in this block does not meet the applicable statutory ument's effective date on the Department of State's records.		
ument's effective date on the Department of State's records.		
record specifies a delayed effective date, but not an effective he 90th day after the record is filed.	ve time, at 12:01 a.m. on the earlie	
September 1 2015		
ed		

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00