207000060135

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EXAMINER

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COVER LETTER

TO: Registration S Division of Co	ection rporations			
SUBJECT: J&L US	SA Enterprise LLC	5-11-11-12-0		
	(Name of Lim	lited Liability Company)		
The enclosed Articles of	f Amendment and fee(s) are sub	omitted for filing.		
Please return all corresp	ondence concerning this matter	to the following:		
		(Name of Person)		
•	O&J	Professional Services Inc	7 20	
	(Firm/Company)			
	782 NW 42 Ave # 2		2909 FEB 25 TALLAHASS	
		(Address)	, man	
		Miami FL 33126		
		(City/State and Zip Code)	PH 3: 34 E.FLORIDA	
For further information of	concerning this matter, please c	all:	,	
Osvaldo Martinez		at (305) 446-4006		
(Name of Person)		(Area Code & Daytime T	'elephone Number)	
Enclosed is a check for t	he following amount:			
☑ \$25.00 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)	
	INC ADDDECC			

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

(Name of the Limited Liability	A Enterprise LLC <u>Company as it now appea</u> Limited Liability Company)	ars on our records.)		-	
The Articles of Organization for this Limited Liability C Florida document number L07000060135	Company were filed on	06/07/2007	and	assigne	ed
This amendment is submitted to amend the following:					
A. If amending name, enter the new name of the lim	ited liability company he	ere:			
The new name must be distinguishable and end with the wor "L.L.C."	rds "Limited Liability Comp	pany," the designation	"LLC" or t		viation
Enter new principal offices address, if applicable:			SECK ALLA	2009 F	
(Principal office address MUST BE A STREET ADDR	RESS)		AHASS	€B 2	***
			- <u>88</u> 0	5	
				2	Ö
Enter new mailing address, if applicable:				ယ္	The same of
(Mailing address MAY BE A POST OFFICE BOX)			27	ř.	
B. If amending the registered agent and/or regist registered agent and/or the new registered office add	tered office address on ress here:	our records, ente	r the nam	e of th	e new
Name of New Registered Agent:					
New Registered Office Address:	//	Same Flants	- 11		
	(E	Enter Florida street	aaaress)		
	(City)	, Florida	(7:	Code)	
	IU.HVI		izin (oaer	

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

i . . 4

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Pedro Hernandez	318 indian Trace # 177 Weston FL 33326	Add Remove
<u>MGR</u>	Alejandro Goncalve	318 Indian Trace # 177 Weston FL 33326	Add Remove
			Add Remove
			Add Remove
			2009 RESECTION OF THE PARTY OF
D. If amer	nding any other information, enter	change(s) here: (Attach additional sheets, if necessar	Confidence ω
_ _			
_			
Dated	no.		-
	Signature of a	member or authorized representative of a member CJANAN CONCALVE Typed or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00