

L070000086107

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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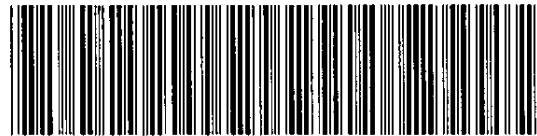
(Business Entity Name)

(Document Number)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

C. LEWIS

SEP 10 2009

EXAMINER

COVER LETTER

**TO: Registration Section.
Division of Corporations**

SUBJECT: Siren Enterprises, LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Janet C. Neris

Name of Person

Neris & Associates, P.A.

Firm/Company

14750 nw 77th Ct, Ste 306

Address

Miami lakes, FL 33016

City/State and Zip Code

janet@jclawmiami.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Janet C. Neris

Name of Person

at (305)

822-5513

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

FILED

2009 SEP -9 PM 4:51

SECRETARY OF STATE
TALLAHASSEE, FLORIDA

Siren Enterprises, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Company were filed on 08/22/07 and assigned
Florida document number L07000086107.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

JC Miami Holdings, LLC

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

14750 NW 77th Ct., Ste 306

(Principal office address MUST BE A STREET ADDRESS)

Miami Lakes, FL 33016

Enter new mailing address, if applicable:

14750 NW 77th Ct., Ste 306

(Mailing address MAY BE A POST OFFICE BOX)

Miami Lakes, FL 33016

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:

Neris & Associates, P.A.

New Registered Office Address:

14750 NW 77th Ct., Ste 306

Enter Florida street address

Miami Lakes

, Florida

33016

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>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Angel M. Neris	6625 Miami Lakes Dr. Ste 214 Miami Lakes, FL 33014	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Janet C. Neris	14750 NW 77th Ct., Ste 306 Miami Lakes, FL 33016	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated 09/22, 2009

Signature of a member or authorized representative of a member

Janet C. Neris

Typed or printed name of signee

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TALLAHASSEE, FLORIDA