## \*L0800002587/

(Re	equestor's Name)		
(Address)			
(Ad	ldress)		
(Cit	ty/State/Zip/Phone	→ #)	
PICK-UP	☐ WAIT	MAIL	
(Bu	siness Entity Nan	ne)	
(Document Number)			
Certified Copies	_ Certificates	of Status	
Special Instructions to Filing Officer:			
		:	

0

Office Use Only



300252719143

10/11/13--01030--004 \*\*25.00

TILED

TILED

TILED

K.SALY EXAMINER OCT 14 2013

## **COVER LETTER**

TO: Registration Section
Division of Corporations

SUBJECT: IDMJI PROPERTIES, 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:

OSCAR CARRILLO

Name of Person

**IDMJI PROPERTIES** 

Firm/Company

17150 ROYAL PALM BLVD STE 4

Address

WESTON, FL 33326

City/State and Zip Code

accounting@idmjiusa.com

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

For further information concerning this matter, please call:

**OSCAR CARRILLO** 

<sub>...</sub>954、217-0712

Name of Person

Area Code & Daytime Telephone Number

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)

□\$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

13 OCT 11 PH 3: 07
IALLAMASSEE, FLORIDA

IDMJI PROPERTIES, 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	y Company were filed on 03/12/2008	and assigned
Florida document number L08000025871		
This amendment is submitted to amend the following	Ç.	
A. If amending name, enter the new name of the l	limited liability company here:	
The new name must be distinguishable and end with the "L.L.C."	words "Limited Liability Company," the de-	signation "LLC" or the abbreviation
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET AD	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		ds, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida	a street address
<u></u>		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 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>	Type of Action
MGR	OSCAR CARRILLO	17150 ROYAL PALM BLVD STE	4 🗸 Add
		WESTON, FLORIDA 33326	Remove
	•		-
<del></del> -			Add
			Remove
			Add
			Remove
			Add
			Remove
			Add
			Remove
			-
			Add
			Remove

D. If a	amending any other information, enter change(s) here: (Attach additional sheets, if	necessary.)
•		
Dated_	SEPTEMBER 27 2013	
	- Tipt Wall	
	Signature of a member or authorized representative of a member	
	Peila Mareno	
	Typed or printed name of signee	
	Page 3 of 3	
	Filing Fee: \$25.00	