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FILED

AT MAY 18 PH 3: 34:
SECRETARY OF STATE
PARAMETERS FEE FLORDA

D. SCOTT MAY 19 2017

COVER LETTER

TO: Registration Se Division of Co			
J & B INT SUBJECT:	ERNATIONAL TRADING, L	LC	
SUBJECT.	Name of Lin	nited Liability Company	
	Amendment and fee(s) are sub	-	
	THAMARA PEREZ		
		Name of Person	······
	TABADESA ASSOCIAT	ES INC	
	•		
	419 W 49 ST STE 111		
	· · · · · · · · · · · · · · · · · · ·	Address	
	HIALEAH, FL 33012		
		City/State and Zip Code	
•	TAMMYP@TABADESA.		
	E-mail address: (to be used for future annual report noti-	fication)
For further information of	concerning this matter, please c	all:	پېښې
THAMARA PEREZ		305 558-0622 at ()	OF CO.
Name o	of Person	Area Code Daytime	e Telephone Number
Enclosed is a check for the	he following amount:		EFF P
\$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certificate of Status & Certified Copy (additional copy is enclosed)
MAII	ING ADDRESS:	STREET/COURI	ER ADDRESS:

MAILING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J & B INTERNATIONAL TRADING	•	
(Name of the Limited (A	Liability Company as it now appears on our records.) Florida Limited Liability Company)	
The Articles of Organization for this Limited Liab Florida document number L08000063040	pility Company were filed on 06/27/2008	and assigned
This amendment is submitted to amend the follow	ving:	
A. If amending name, enter the new name of the	he limited liability company here:	
he new name must be distinguishable and contain the word	ds "Limited Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Cnter new principal offices address, if applicab	ole:	
Principal office address MUST BE A STREET.	ADDRESS)	
inter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BO	<u></u>	
s. If amending the registered agent and/or egistered agent and/or the new registered offic	registered office address on our records, ece address here:	enter the name of the
Name of New Registered Agent:		3 美型
New Registered Office Address:		海
	Enter Florida street address , Floric	THE PERSON
	City	Zip Code
In Desistant Assetts Signature if shanging Des	mintanad Amanta	SECTION AND SECTIO

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>	Address	Type of Action
MGRM	YOSEPP BESSERANI ABADIJAN	10210 S.W. 154 PLACE,	
		APT. #105	Remove
		MIAMI, FL 33196	Change
			Add
			Remove
			Change
			☐ Add
			□ Remove
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an effective dat	is listed, the date must be specific	c and cannot be prior to	date of filing or more that	an 90 days after filing.	
	e inserted in this block does n ctive date on the Department		le statutory filing requ	irements, this date	will not be listed
	on to date on the Beparation				do: (2)
record sn	cifies a delayed effectives	e data but not	an offective time	at 12:01 a m	on the parlier
The 90th o	ay after the record is file	ed.	an enective time,	at 12.01 a.m.	on the earlier
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Filing Fee: \$25.00