

20900001016

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

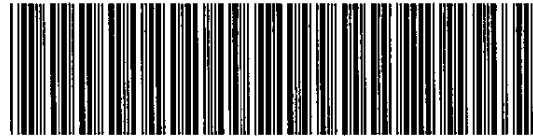
(Business Entity Name)

(Document Number)

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: The Juice House 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:

Emilio Ruiz
Name of Person

Firm/Company

103200 Overseas Highway #13,
Address

Key Largo, Florida 33037
City/State and Zip Code

emilio_ruiz3@yahoo.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Emilio Ruiz at (305) 807-6285
Name of Person Area Code & Daytime Telephone Number

RECEIVED
DIVISION OF CORPORATIONS
TALLAHASSEE, FLORIDA
JUN 15 2006

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

THE JUICE HOUSE 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 01/30/2009 and assigned Florida document number L09000010116.

This amendment is submitted to amend the following:

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

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:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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:

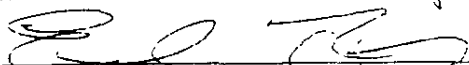
Name of New Registered Agent: Emilio Ruiz

New Registered Office Address: 103200 Overseas Highway #13,
Enter Florida street address

Key Largo, Florida 33037
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	Maribel Reyes	786 Dolphin Ave	<input type="checkbox"/> Add
		Key Largo, Flora 33037	<input checked="" type="checkbox"/> Remove
MGR	Antonio B. Lopez	786 Dolphin Ave	<input type="checkbox"/> Add
		Key Largo, Flora 33037	<input checked="" type="checkbox"/> Remove
MGRM	Emilio Ruiz	103200 Overseas Highway #13	<input checked="" type="checkbox"/> Add
		Key Largo, FI 33037	<input type="checkbox"/> Remove
MGRM	Cristina Ruiz	103200 Overseas Highway #13	<input checked="" type="checkbox"/> Add
		Key Largo, FI 33037	<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 November 30 , 2013


Signature of a member or authorized representative of a member

Emilio Ruiz
Typed or printed name of signee

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Filing Fee: \$25.00

NOV 29 11 15 AM '13