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S. HAWKES

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EXAMINER

COVER LETTER

то:	Registration Sect Division of Corpo			
SUBJEC	:т. Jake's Ba	ar Enterprises, Inc.	,	o o
JOBSE	<u> </u>		ited Liability Company)	
The encl	osed Articles of A	mendment and fee(s) are sub	omitted for filing.	
Please re	eturn all correspond	dence concerning this matter	to the following:	
		Jorge Gaviria, Esq.		
			(Name of Person)	
		Jorge Gaviria, Esq.		
	•		(Firm/Company)	
		9769 South Dixie Highwa	ay, Suite 101	
			(Address)	
		Miami, Fl 33156		
			(City/State and Zip Code)	
For furth	er information con	cerning this matter, please c	all:	
Laura E	. Montejo		at (305) 666-8844 ext. 3	
	(Name of	Person)	(Area Code & Daytime To	elephone Number)
Enclosed	is a check for the	following amount:		
☑ \$25.0	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

Jake's Bar Enterprises, Inc.

(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 February 6, 2009 Florida document number L09000012008 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: New Registered Office Address: (Enter Florida street address)

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.

(City)

(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 = Ma $MGRM = 1$	nnager Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
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D. If amen	ding any other information, enter chang	ge(s) here: (Attach additional sheets, if necesse	Remove
M	ember Opus Tranding Inc., a Florida Corp	poration was misspelled. The correct spelling i	is
<u>o</u>	pus Trading Inc., a Florida Corporation		
Dated Febru	Signature of a membe	r or authorized representative of a member	

Page 2 of 2

Filing Fee: \$25.00