0000716971

(Requestor's Name)	
(Address)	8001890
(Address)	
(City/State/Zip/Phone #)	
(Business Entity Name)	12/30/10010
(Document Number)	
Certified Copies Certificates of Status	

Special Instructions to Filing Officer:

L. SELLERS

JAN - 3 2011

EXAMINER

Office Use Only



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020--018 **25.00

COVER LETTER

TO: Registration Sect Division of Corpo		i		
SUBJECT:	JAD	AJA, LLC		
	Name of Limit	ed Liability Company		
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.		,
	dence concerning this matter	_		:
	A	LEXANDER EYNIS	* ***	
	· · · · · · · · · · · · · · · · · · ·	Name of Person		
		ATTORNEY		
		Firm/Company		
	20801 BI	SCAYNE BLVD, SUI	TE 403	
•		Address		
•	A\	/ENTURA, FL 33180		
		City/State and Zip Code		
	E-mail address: (to	VIS@HOTMAIL.COM be used for future annual repo	rt notification)	
For further information con	cerning this matter, please ca	ill:	S. V. S.	
ALEXA	NDER EYNIS	at (305)	935 4079	
Name of P	erson		Daytime Telephone Number	
	C 11			
Enclosed is a check for the	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy. (additional copy is en	closed) Certified	e of Status &
Registrati Division P.O. Box	G ADDRESS: on Section of Corporations 6327 ee, FL 32314	Registration Division of C Clifton Build	Corporations	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JADAJA	, LLC		
(Name of the Limited Liability Compan (A Florida Limited Liability	y as it now appears	on our records.)	
(ATTORIA EMMOS EM	iointy company)		
The Articles of Organization for this Limited Liability Company v	vere filed on	08/07/2009	and assigned
Florida document number L09000076971			
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liabil	ity company here:	•	
The new name must be distinguishable and end with the words "Limite "L.L.C."	d Liability Compan	y," the designation "LL	.C" or the abbreviation
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 offi- registered agent and/or the new registered office address here:		r records, enter the	e name of the new
Togestored agent and of the new Togestored office address here.			
Name of New Registered Agent:			
	,		
New Registered Office Address:		r Florida street addre	- 30
	Ente	r r ioriaa sireei aaare	
·		, Florida	The Street
	City		Zip Code
New Registered Agent's Signature, if changing Registered Agent;			
I hereby accept the appointment as registered agent and agree the provisions of all statutes relative to the proper and comple	to act in this cap	acity. I further agree	Topicomply with
accept the obligations of my position as registered agent as pr			
being filed to merely reflect a change in the registered office a	ddress, I hereby c	confirm that the limit	ed liability
company has been notified in writing of this change.			

If amending the Managers or Managing Members on our records, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	C. ANTHONY RUMO	RE 517 SW 1ST AVENUE FORT LAUDERDALE, FL	Add 33301
			Add Remove
			Add Remove
			AddRemove
			= ₽
D. If amen	ding any other information, en	ter change(s) here: (Attach additional sheets,	if necessary.)
_			
 	DECEMBER 17	2010	
		P. A. S.	
		a member or authorized representative of a memb	er
	JOR	GE DANIEL ARBITMAN BRAIMAN Typed or printed name of signee	A Company of the Comp
		Lyped of printed name of signee	

yped or printed name of signed

Page 2 of 2

Filing Fee: \$25.00