

L090000 77338

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

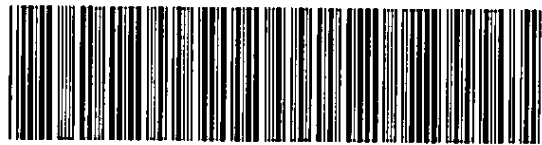
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JUL 28 2022

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FILED
JUL 28 2022
TALLAHASSEE, FL
SECRETARY OF STATE

COVER LETTER

TO: **Registration Section
Division of Corporations**

SUBJECT: JOHNTEX, 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:

Cintia Carnevale

Name of Person

JohnTex, LLC

Firm/Company

3245 NE 184 Street, Unit 13102

Address

Aventura, FL 33160

City/State and Zip Code

cintiacarnevale@gmail.com

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

For further information concerning this matter, please call:

Cintia Carnevale

305

761-3693

at ()

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

FILED

MAY 25 2009

JOHNTEX, LLC

(Name of the Limited Liability Company as it now appears on our records)
(A Florida Limited Liability Company)

SECRETARY OF STATE
TALLAHASSEE, FL

The Articles of Organization for this Limited Liability Company were filed on 08/12/2009 and assigned
Florida document number L09000077338.

This amendment is submitted to amend the following:

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

N/A

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

3245 NE 184 Street, Unit 13102

(Principal office address MUST BE A STREET ADDRESS)

Aventura, FL 33160

Enter new mailing address, if applicable:

3245 NE 184 Street, Unit 13102

(Mailing address MAY BE A POST OFFICE BOX)

Aventura, FL 33160

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:

N/A

New Registered Office Address:

N/A

Enter Florida street address

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 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>	<u>Address</u>	<u>Type of Action</u>
MGRM	CINTIA CARNEVALE	3245 NE 184 Street, Unit 13102	<input checked="" type="checkbox"/> Add
		Aventura, FL 33160	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGRM	JUAN CARLOS LEBON	5701 Collins Ave, PH03	<input type="checkbox"/> Add
		Miami Beach, FL 33140	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Change

E. Effective date, if other than the date of filing: _____ (optional)
 (If an effective date is listed, it must be the date the invention was first used in commerce.)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

Dated **June 29** , 2021

JUAN CARLOS LEBON

Typed or printed name of signee

Filing Fee: \$25.00