L09000092422

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EXAMINER

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SECRETARY OF STATE

COVER LETTER

TO: Registration S Division of Co						
SUBJECT:	JRKL Inv	vestments, LLC				
	Name of Limi	ted Liability Company				
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.				
Please return all corresp	ondence concerning this matter	to the following:				
	F	rancy Jamileth Rojas		_		
		Name of Person				
	JF	RKL Investments, LLC				
Firm/Company		···· <u> </u>	¥s.	200		
1915 Brickell Ave. Apt. 1501				2009 OCT 26		
Address				ARY ASSI	26	
Miami, FL 22129				7 OF 3	PM 3: 32	
		City/State and Zip Code		LORI	ယ	Constitution
	jamilethro@ hotmal.com E-mail address: (to be used for future annual report notification)				~	
For further information	concerning this matter, please c	•	,			
 	lamileth Rojas	at (82-4115		٠	
Name of	of Person	Area Code & Daytime	Telephone Numbe	er		
Enclosed is a check for t	the following amount:					
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certifie	ate of St	atus &	osed)

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

JRKL Investi	ments, LLC			
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears of Liability Company)	on our records.)		
The Articles of Organization for this Limited Liability Company Florida document numberL0900092422	were filed on Sep	tember 24, 20	009 and as	signed
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	oility company here:			
The new name must be distinguishable and end with the words "Limi"L.L.C."	ited Liability Company	" the designation	LC" the	abbreviation
Enter new principal offices address, if applicable:	Ν,	/ L - 2	7	49,7 pressure pressur
(Principal office address MUST BE A STREET ADDRESS)			AA O	<u> </u>
		- 		
Enter new mailing address, if applicable:	N/	4	3: 32 STATE ORIDA	
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her Name of New Registered Agent:		records, enter	the name	of the new
New Registered Office Address:	N/A			
	Florida street a	ddress		
	N/A City	, Florida _	N /A Zip Cod	'e
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agr the provisions of all statutes relative to the proper and comp accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	lete performance of provided for in Chap	my duties, and opter 608, F.S. Openfirm that the l	I am familia r, if this doc limited liabil	r with and ument is ity

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>	Address	Type of Action			
	Jamileth Rojas	(Please read note below in Section D.)	Add Remove			
	Francy Jamileth Rojas	(Please read note below in Section D.)	Add Remove			
			Add Add Comove Como			
D. If ar		(s) here: (Attach additional sheets, if necessary.) ndment is to edit the name of the member				
		e ("Francy") is included. The complete	-			
	name of the existing member is FRAN	NCY JAMILETH ROJAS, and as such	_			
	should be recorded in the Articles of C	Organization of JRKL Investments, LLC.				
	All other information for this member ((e.g. title & address) should stay the same	<u>.</u>			
Dated _	F.	or authorized representative of a member Jamileth Rojas or printed name of signee				
	**	-				

Page 2 of 2

Filing Fee: \$25.00