L10 0000 30620

(Re	equestor's Name)		
(Address)			-
(Ac	ddress)		-
(Ci	ty/State/Zip/Phon	e #)	-
PICK-UP	☐ WAIT	MAIL	
(Bi	usiness Entity Nar	me)	-
(Dx	ocument Number)	,	-
Certified Copies	Certificate:	s of Status	-
Special Instructions to	Filing Officer:]





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COVER LETTER

	Registration S Division of Co			
SUBJEC		AL INVESTMENTS, LLC		
.90 D 3120		Name of Lim	ited Liability Company	
		of Amendment and fee(s) are sub	·	
r lease re	ium an corres	pondence concerning this matter ESTELLE MARIE V. SAI	-	
			Name of Person	
		JA DORAL INVESTMEN	STS, LLC	
		 	Firm/Company	
		1783 NW 93RD AVENUE	3	
			Address	
		MIAMI, FL 33172-2921		
			City/State and Zip Code	
		estelle@sanchelimaint.com	to be used for future annual report notific	nation)
For furth	er information	concerning this matter, please es	·	cation)
ESTELL	E MARIE V.	SANCHELIMA	305 591-4343	
-	Name	of Person	at () Area Code Daytime	Telephone 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)

TO:

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

JA DORAL INVESTMENTS, LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on MARCH 17, 2010	and assigned
Florida document number L10000030620		
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 contain the words "Limited Liab	ility Company," the designation "LLC" or th	e abbreviation L.C."
Enter new principal offices address, if applicable:		020 DE
Principal office address MUST BE A STREET ADDRESS)		<u> </u>
		, – –
		ARII:
Enter new mailing address, if applicable:		•••
Mailing address MAY BE A POST OFFICE BOX)		5
B. If amending the registered agent and/or registered office agent and/or the new registered office address here:	address on our records, <u>enter the n</u>	ame of the new regis
Name of New Registered Agent:		
New Registered Office Address:		
	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>	Name	Address	Type of Action
MMBR	Sanchelima International Inc.	1781 NW 93rd Avenue	□Add
		Miami, FL 33172-2921	Remove
			□Change
MGR	Juan Andres Sanchelima	1781 NW 93rd Avenue	M Add
		Miami, FL 33172-2921	[Perrove
			Change D20 DAdd
			Remarye Change
			□Add
			□Remove
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effective date, if other than the date of filing: effective date is listed, the date must be specific and cann e: If the date inserted in this block does not meet ument's effective date on the Department of State'	the applicable st				
cord specifies a delayed effective date, but not an e	ffective time, at	12:01 a.m. on the	earlier of: (b) T	he 90th day	after t
edx December E, S	<u>)C2C.</u> .				
V=541) (a)					

Filing Fee: \$25.00

Typed or printed name of signee