L10000052082

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SECRETARY OF STATE
ORIGINALSSEE: FLORIDA

J. BRYAN

NOV -2 2011

EXAMINER

COVER LETTER

TO: Registration Division of C	Section orporations			
SUBJECT:	JO.	YAK LLC		
	Name of Limit	ed Liability Company		
	•			
The enclosed Articles	of Amendment and fee(s) are sub	mitted for filing.		
Please feturn all corres	pondence concerning this matter	to the following:		
	•	Martin I. Jajan		
		Name of Person	The second secon	e
				£ .
		JAJAN, PLLC	and the second	,
		Firm/Company		三丁
1		10 Wall St. 11th Floor		9 7
		Address	SSE S	= m
	6	lew York, 10005, NY	TO THE	FILED WEST
		City/State and Zip Code	OR	2
	S	ijajan@jajanlaw.com o be used for future annual report notifica		ig.
	·		non)	
For further information	concerning this matter, please e	all:		
В	enjamin Guelli	at (212) 3	528616	
Nam	e of Person	Aren Code & Daytime	elephone Number	
Enclosed is a check fo	r the following amount:			
▼\$25.00 Filing Foo	S30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status Certified Copy (additional copy is e	
	ILING ADDRESS:	STREET/COURIE	RADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JO'	YAK LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appea ited Liability Company)	rs on our records.)	
The Articles of Organization for this Limited Liability Com Florida document numberL10000052082	pany were filed on	May 14 2010	and assigned
This amendment is submitted to amend the following:			
A. If amending name, <u>enter the new name of the limited</u>	Hability company he	<u>re</u> :	
The new name must be disringuishable and end with the words "L.t.,C."	*Limited Liability Comp	any," the designation "	LLC" or the abbreviatio
Enter new principal offices address, if applicable:			`
(Principal office address MUST BE A STREET ADDRES	<u> </u>		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			N-1 PH 4:21
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		our records, <u>enter (</u>	the name of the nev
Name of New Registered Agent:			
New Registered Office Address:	L'in	uer Florida streut ode	Innes
	r.n		ie mint
	City	, Florida	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 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.

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 = Manager MGRM = Managing Member

<u>Title</u>	Name	Address	Type of Action				
MGRM	Jose A, Karnoubi	150 Alhambra Circle, Suite 715 Coral Gables, FL 33134	Add Remove				
MGRM	Omar Karnoubi	150 Alhambra Circle. Suite 715 Coral Gables, FL 33134	Add Remave				
MGRM	Abdo Karnoubi	150 Alhambra Circle, Suite 715 Coral Gables, FL, 33134	Add				
MGRM	Kasein E. Karnoubi	150 Alhambra Circle, Suite 715 Coral Gables, EL, 33134	Add				
MGRM	Yamil Karnoubi	150 Alhambra Circle, Suite 715 Coral Gables, EL. 33134	Add ZKemove				
MGRM	MUNA HOLDINGS Inc.	Vanterpool Plaza, 2nd Floor Wickhams Cay I, Road Town, Tortola British Virgin Islands	Add Remove				
D. If amend	ing any other information, enter chan	ge(s) here: (Attach additional sheets, if necessary.,	EL SES				
			PH 4: 28				
	October 20 2	011					
Dated							
	Signature of a member or authorized representative of a member						
Yamil Kamoubi							
Typed or printed name of signee							

Page 2 of 2

Filing Fee: \$25.00