L11000041386

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COVER LETTER

Division of Co			
SOLEIL C	CJ, LLC		
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
	ondence concerning this matter	_	
	ANDRES ABADI		
		Name of Person	
	META MANAGEMENT O	SROUP LLC	
		Firm/Company	
	20806 HIGHLAND LAKE	S BLVD	
		Address	
	MIAMI. FLORIDA. 33179		
	DIAYEDOODDOOMA!!	City/State and Zip Code	
	PMAYERCORP@GMAIL. E-mail address: (to be used for future annual report no	otification)
For further information	concerning this matter, please ca	all:	
PABLO MAYER		786 861-9603	
Name	of Person	at () Area Code Dayti	ime 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 Addre Registration Division of P.O. Box 63	Section Corporations	Street Address: Registration S Division of C The Centre of	orporations

Tallahassee, FL 32314

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT ARTICLES OF ORGANIZATION **OF**

20246 21 00 1:34

SOLEIL CJ, LLC

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

(A FI	orida Limited I	Liability Compan	y)	
The Articles of Organization for this Limited Liabili Florida document number L11000041386	ty Company	were filed on	04/06/2011	and assigned
This amendment is submitted to amend the following	g:			
A. If amending name, enter the new name of the	limited liab	ility company	here:	
The new name must be distinguishable and contain the words	Limited Liabil	ity Company," th	ne designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable	:	20806 HIGH	ILAND LAKES BLV	D
(Principal office address MUST BE A STREET ADDRESS)		MIAMI, FL 3	33179	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		20806 HIGH	HLAND LAKES BLVI 33179	D
B. If amending the registered agent and/or regist agent and/or the new registered office address he		address on ou	r records, <u>enter the</u>	name of the new registered
Name of New Registered Agent:	ETA MANAC	SEMENT GRO	OUP LLC	
New Registered Office Address: 20	0806 HIGHL	AND LAKES B	LVD.	
		Enter	Florida street address	
м	IAMI		, Floric	da <u>33179</u>
_		City		Zip Code
New Registered Agent's Signature, if changing Regis	tered 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.

PABLO MAYER

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	<u>Address</u>	Type of Action
MGR	PRESTAN, MIGDALIA E	2100 W 76 STREET	
		SUITE 401	≅Remove
		HIALEAH, FL 33016	□Change
MGR	META MANAGEMENT GROUP LLC	20806 HIGHLAND LAKES BLVD	(⊠) ∧dd
		MIAMI, FL 33179	🗆 Remove
			□ Change
			≅Add
			□Remove
			Change
			□Remove
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ective date, if other than the date effective date is listed, the date must be e: If the date inserted in this block ument's effective date on the Department.	does not meet the applicable	late of filing or more than 9	(optional) 10 days after filing.) Pursuant ements, this date will not b	to 605.020 be listed a
cord specifies a delayed effective d s filed.	ate, but not an effective time.	at 12:01 a.m. on the ea	rlier of: (b) The 90th da	y after th
30 of September				
	PABLO MAYER gnature of a member or authorize			