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Account Number : 120150000038 Phone : (305)485-9700 Fax Number : (305)436-0191

**Enter the email address for this business entity to be used for future annual report mailings. Enter only one pmail address please \$7.

Emily (proceetings a) torrevadillolly.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN J INVESTMENT, LLC

Committee the same of the same	و ويتحصد وجيدو والد حدد الدائروال الراج ويبطر ويتناك از وتدييد .
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SECRETARY OF STATE
ALLAMSSEE, PLORBA

D. SCOTT 0CT 0 4 2016

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J INVESTMENT, LLC				
(Name of the Limit	ed Liability Comp. (A Florida Limited	iny as it now appears on o Liability Company)	ur secards.)	
The Articles of Organization for this Limited L Florida document number L11000045910	iability Company	were filed on 04/18/	11	_ and assigned
This amendment is submitted to amend the foll	owing:			
A. If amending name, enter the new name o	f the limited liab	oility company here:		
N/A				
The new name must be distinguishable and end with the	words "Limited List	bility Company," the designa	ation "LLC" or the abbi	revistion "L.L.C."
Enter new principal offices address, if applicable:		N/A		
(Principal office address MUST BE A STREE				≥ SE 5
·				
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)		N/A		<u> </u>
				5 <u>2 5</u>
				êd g
B. If amending the registered agent and registered agent and/or the new registered o			records, enter th	e name of the nev
Name of New Registered Agent:	Hani Jarda	ck		
	44402 NIIA	At Circot Suito 20	.4	
New Registered Office Address:	114UZ INVV	41 Street, Suite 20 Enter Florida str		
	Doral		204	78
	50141	City	, Florida	Zip Code
New Registered Agent's Signature, if changing	Registered Agent:	<u>{</u>		•
I hereby accept the appointment as registere		-	city. I further agree	e to comply with the

If Changing Registered Agent, Signature of New Registered Agent

Page 1 of 3

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.

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If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

<u> Fitle</u>	Name	Address	Type of Action
····		***************************************	
			☐ Remove
			Remove
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			SECRETATE OF ORDER
	- 		
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If amending any other information, enter change(s) here	e: (Attach additional sheets, if necessary.)
Effective date, if other than the date of filing: (The effective date must be specific, cannot be prior to date of receipt or f the date this document is filed by the Florida Department of State)	(optional) iled date and cannot be more than 90 days after
Dated September 29 2016	
4/	a. M. Jardall
Signature of a member of duth	orized representative of a member
Hanl Jardack	ed name of tiones

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