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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

D. BRUCE

AUG 28 2012

EXAMINER

COVER LETTER

TO: Registration Section
Division of Corporations

JUACOS, LLC

SUBJECT: _____
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN DIEGO ROA SOLANO

Name of Person

JUACOS LLC

Firm/Company

791 CRANDON BOULEVARD, APT. 1208

Address

KEY BISCAIYNE, FLORIDA 33149-2551

City/State and Zip Code

juandroas@hotmail.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Juan Diego Roa Solano

Name of Person

at (617)

543-8727

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF
JUACOS, LLC**

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

SEPTEMBER 12, 2011

The Articles of Organization for this Limited Liability Company were filed on SEPTEMBER 12, 2011 and assigned
Florida document number L11000104183

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:

Name of New Registered Agent: JUAN DIEGO ROA SOLANO

New Registered Office Address: 791 CRANDON BLVD., APT. 1208
Enter Florida street address

KEY BISCAYNE, Florida FL 33149-2551
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 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.

[Signature]
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:

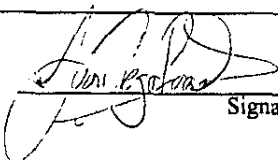
MGR = Manager

MGRM = Managing Member

Title	Name	Address	Type of Action
MGR	Andres Felipe Roa Solano	901 Ponce de Leon Blvd. Ste. 603 Coral Gables, Florida 33134	<input type="checkbox"/> Add <input checked="" type="checkbox"/> Remove
MGR	Juan Diego Roa Solano	791 Crandon Blvd., Apt. 1208 Key Biscayne, Florida 33149-2551	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

Dated August 22, 2012



Signature of a member or authorized representative of a member

Juan Diego Roa Solano

Typed or printed name of signee

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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AND
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