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TA THE BY SELECTION OF CONSISTENCY.

J. HARRIS

LAW OFFICES

Doumar, Allsworth, Laystrom, Voigt, Wachs & Adair, LP

1177 SOUTHEAST THIRD AVENUE FORT LAUDERDALE, FLORIDA 33316-1109

JOHN H. ADAIR, III, P.A. EMERSON ALLSWORTH, P.A. E. SCOTT ALLSWORTH, P.A. MARK E. ALLSWORTH, P.A.

BROWARD (954) 762-3400 TOLL FREE (866) 242-9488 TELEFAX (954) 525-3423 WEBSITE: SFLALAW.COM BENJAMIN R. DISHOWITZ, P.A. RAYMOND A. DOUMAR, P.A.* C. WILLIAM LAYSTROM, JR., P.A. JOHN D. VOIGT, P.A. JEFFREY S. WACHS, P.A. †

OF COUNSEL

JOHN W. PERLOFF, P.A. JODIE SEIGEL, P.A.

+ ALSO ADMITTED IN PENNSYLVANIA * ALSO ADMITTED IN MICHIGAN

July 14, 2014

Florida Department of State Registration Section Division of Corporations Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301 (850) 245-6051

RE:

Articles of Amendment to Articles of Organization

IMJ&G Investments, LLC

Dear Sir/Madam:

Enclosed please find check #2149 from Doumar, Allsworth et al. Trust Account in the amount of \$60.00 made payable to Florida Department of State for the filing fees, Certificate of Status and Certified copy of the amendment to the Articles of Organization of a Florida limited liability company for the above-referenced business.

Should you have any questions, please do not hesitate to contact me.

Sincerely,

John/H. Adair III, Esq.

JA/la Enclosure.

COVER LETTER

TO:

Registration Section **Division of Corporations**

IMJ&G INVESTMENTS, LLC

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:

Mark Allsworth Name of Person Doumar, Allsworth 1177 SE 3rd Ave Ft Lauderdale, FL 33316 City/State and Zip Code jadair@sflalaw.com E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

John Adair

 $at \underbrace{(954)}_{Area\ Code} \underbrace{762\text{-}3400}_{Daytime\ Telephone\ Number}$

Name of Person

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 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

IMJ&G INVESTMENTS, LLC.		
(Name of the Limited Liability (A Florida L	Company as it now appears on our records.) Limited Liability Company)	
The Articles of Organization for this Limited Liability Cor Florida document number L11000117836	mpany were filed on October 14, 2011	_ and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limite	ed liability company here:	DIVISI
The new name must be distinguishable and end with the words "Limit	ted Liability Company," the designation "LLC" or the abbre	eviation L.L.G.
Enter new principal offices address, if applicable:		6 521
(Principal office address MUST BE A STREET ADDRE	ESS)	2 2 2 C
		3: 4 2
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office addresses		name of the nev
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Florida	
		Zin 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 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

AMBR = Authorized Member Title Name **Address Type of Action JACOB SOFER** 3111 NE 29TH ST. #3 MGR □ Add FT LAUDERDALE, FL 33308 Remove 4100 Galt Ocean Drive, Unit 1509 **IZHAK YUVAL** AMBR Ft Lauderdale, FL 33308 Remove □ Add □ ASta _□ Rémov □ Add □ Add ☐ Remove

If amen	ding any other information, enter change(s) here: (Attach additional sheets, if n	iecessary.)
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Effective (The effective)	re date, if other than the date of filing:	ptional)
the date (this document is filed by the Florida Department of State)	iys alici
Dated_	Lings	
	Signature of a member or authorized representative of a member JACOB SOFER	
	0.1002 001/211	

Page 3 of 3

Filing Fee: \$25.00

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