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SECRETARY OF SAME TO A LPR -2 AH II: 03

APR - 8 2012 T. HAMPTON

COVER LETTER .

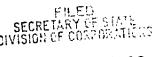
Registration Section
Division of Corporations

TO:

SUBJECT:	I & J DEV	ELOPMENT, LLC			
SUBJECT.	* * *** ** ***	ited Liability Company			
The enclosed Articles of	of Amendment and fee(s) are su	bmitted for filing.			
Please return all corresp	condence concerning this matte	r to the following:			
	EL	ELIZABETH VELAZQUEZ			
		Name of Person			
	Firm/Company				
	551 NW 51 AVE Address				
		MIAMI, FL 33134			
		City/State and Zip Code			
	ELIZA	BETHVG2@YAHOO.C	ОМ		
r eare a		to be used for future annual report	notification)		
For turiner information	concerning this matter, please	call:			
	SETH VELAZQUEZ	at (786)	356-8276		
Name	of Person	Area Code & Di	aytime 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 enc	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)		
Regis Divisi P.O. I	LING ADDRESS: tration Section ion of Corporations Box 6327 nassee, FL 32314	Registration S Division of Co Clifton Buildi	orporations ing ve Center Circle		

2001

TO SECRETARY OF STATE ARTICLES OF ORGANIZATION DIVISION OF COMPORATIONS OF



12 APR -2 AM 11:03

I & J DEVELO	OPMENT, LLC		
(<u>Name of the Limited Liability Comp</u> (A Florida Limited	Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Companies Florida document numberL12000041890	ny were filed on	03/27/2012	_ and assigned
This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited lia	bility company here	:	
The new name must be distinguishable and end with the words "Lin"L.L.C."	nited Liability Compan	y," the designation "LLC	C" or the abbreviation
Enter new principal offices address, if applicable:		· · · · · · · · · · · · · · · · · · ·	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)			
Enter new mailing address, if applicable:	551 NW 51 AV	'E MIAMI, FL 3313	4
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address he		r records, enter the	name of the new
Name of New Registered Agent:			
New Registered Office Address:	Fnta	r Florida street addres.	5
	Ente		J
	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 = N	Managing Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR_	ELIZABETH VELAZQUEZ	14797 SW 24 ST DAVIE ,FL 33325	Add Remove
MGRM	JAVIER ESTEPA	14797 SW 24 ST DAVIE .FL 33325	Add Remove
			Add Remove
			Add Remove
			Add Remove
			Add Remove
D. If amend	ling any other information, enter chang	ge(s) here: (Attach additional sheets, if necessary.)	SECRETARY DIVISION OF CO
			AHII: 03
Dated	03,19	112. A	
	Elizabe	r or authorized representative of a member A COULT I or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00