L12000100917

(Re	questor's Name)	
(Ad	dress)	
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. (Cit	y/State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nar	me)
(Do	cument Number)	
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COVER LETTER

TO:	Registration Se Division of Cor				,
SUBJ	JOECON, I	LLC			
3000		Name of Lim	ited Liability Company		
The er	nclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please	return all correspo	ondence concerning this matter	to the following:		
		SONJA C. DARBY, ESQ.			
			Name of Person	· ·	
•		MARK S. SCHECHNER,			
			Firm/Company	-	-1.00 ·=
-		2121 PONCE DE LEON E	BLVD, STE. 711	;	PEO E TI
			Address		記って
		CORAL GABLES, FL 33	134		FILED PH 12: 38
			City/State and Zip Code		723
		JOECON.MIAMI@GMAII	L.COM to be used for future annual report notif	ication)	38
For fu	rther information c	oncerning this matter, please of	·		*
SONJ	A C. DARBY, ES	Q.	305 446-1621		
	Name o	f Person	at () Area Code Daytime	e Telephone Number	
Enclos	sed is a check for th	ne following amount:			
⊠ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	□ \$60.00 Filing For Certificate of Society Certified Copy (additional copy is	Status &

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

JOECON, LLC		
(Name of the Limited Li (A.F.)	ability Company as it now appears on our records.) orida Limited Liability Company)	
The Articles of Organization for this Limited Liabili	ty Company were filed on AUGUST 6, 2012	and assigned
Florida document number L12000100917	·	
This amendment is submitted to amend the following	g:	
A. If amending name, enter the new name of the	limited liability company here:	
The new name must be distinguishable and contain the words	"Limited Liability Company," the designation "LLC" or the a	bbreviation "L.L.C."
Enter new principal offices address, if applicable:		<u></u>
(Principal office address MUST BE A STREET AL	ODRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX		
(maining undress mar be a rost office box		물 중
		THE THE
	egistered office address on our records, <u>enter</u>	the name of the new
registered agent and/or the new registered office a	address here:	9 T
		五元 王 二
Name of New Registered Agent:		<u> </u>
New Registered Office Address:		중 3
	Enter Florida street address	» ·-
	, Florida	
	Citv	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 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 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>	<u>Name</u>	<u>Address</u>	Type of Action
MGRM	JOSEPH FERNANDEZ	1107 COLUMBUS BLVD.	
		CORAL GABLES, FL 33134	□ Remove
			Change
			Add
			Remove
•			Change
			T SE SE T CRange
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			□ Change

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The 90th day after the record is filed.		Note: If the date document's efforment's efforment's efforment specific the south of the south description of the south d	ay after the record	is filed.				
The 90th day after the record is filed. Dated AUGUST 7 2016	Dated AUGUST 7 2016	Note: If the date of the date of the second specific of the second specific of the second specific of the second se	ay after the record	is filed.	·			
the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of the 90th day after the record is filed. Dated AUGUST 7 , 2016 Signature of a member of authorized representative of a member	Freigh Flerender	Note: If the date document's efforment's efforment's efforment specific the south of the south description of the south d	ay after the record	is filed. 2016 Crashy		of a manhau		

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Filing Fee: \$25.00