

L12000111308

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

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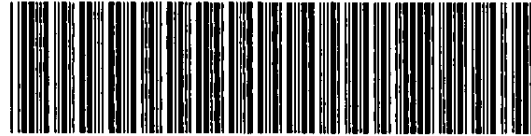
(Business Entity Name)

(Document Number)

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DIVISION OF CORPORATIONS
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OCT 15 2012
T. HAMPTON

COVER LETTER

TO: Registration Section
Division of Corporations

JJ AMERICA HOLDINGS OF LAUDERHILL 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:

BABATUNDE EPOYUN

Name of Person
JJAMERICA HOLDINGS OF LAUDERHILL LLC

Firm/Company
3644 NW 16TH STREET

Address
LAUDERHILL, FL 33311

City/State and Zip Code

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

For further information concerning this matter, please call:

Name of Person at (_____) _____
Area Code & Daytime 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 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
JJ AMERICA HOLDINGS OF LAUDERHILL LLC**

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DIVISION OF CORPORATIONS

12 OCT 12 PM 1:36

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

08/29/2012

The Articles of Organization for ~~LLC 1200011308~~ Company were filed on _____ and assigned
Florida document number L1200011308.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:
JJAMERICA HOLDINGS OF LAUDERHILL LLC

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)

3644 NW 16TH STREET

LAUDERHILL, FL 33311

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

3644 NW 16TH STREET

LAUDERHILL, FL 33311

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: _____

New Registered Office Address: _____

Enter Florida street address

_____, Florida _____

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.

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
MGRM	BABATUNDE EPOYUN	3644 NW 16TH STREET LAUDERHILL, FL 33311	<input checked="" type="checkbox"/> Add <input type="checkbox"/> Remove
MGR	TEMITOPE EPOYUN	3644 NW 16TH STREET LAUDERHILL, FL 33311	<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
			<input type="checkbox"/> Add <input type="checkbox"/> Remove

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

Dated 9/27, 2012.


Signature of a member or authorized representative of a member
BABATUNDE EPOYUN
Typed or printed name of signee

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