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COVER LETTER

	Registration Se Division of Cor		* ***		
SUBJEC	JGKG 1, LI	LC			
SUBJEC	.1	Name of Lim	ited Liability Company		
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please re	tum all correspo	ndence concerning this matter	to the following:		
		Kevin S. Grossfeld, Esq.			
			Name of Person		
		Saul Ewing Arnstein & Le	hr. LLP		
			Firm/Company	<u> </u>	
		200 S. Biscayne Blvd, Suit	e 3600		
			Address		
		Miami, FL 33131			
			City/State and Zip Code		
		kevin.grossfeld@saul.com			
		E-mail address: (to be used for future annual report notif	يت	-71
For furth	er information c	oncerning this matter, please ca	all:	=- ، 1	,,
Georgin	а А. Мога		305 428-4665	b A	111
	Name o	f Person	Area Code Daytime	e Telephone Number	رسه: -
Enclosed	is a check for th	ne following amount:			
\$25.0	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

JGKG 1, LLC	
(Name of the Limited Li (A Fi	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 09/04/2012 and assigned
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 abbreviation "L.L.C."
Enter new principal offices address, if applicable:	:
(Principal office address MUST BE A STREET AL	DDRESS)
F-4	
Enter new mailing address, if applicable:	
Mailing address MAY BE A POST OFFICE BOX	<u> </u>
	100 April 100 Ap
B. If amending the registered agent and/or re registered agent and/or the new registered office:	egistered office address on our records, enter the name of the n
egistered agent and of 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 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>	Address	Type of Action
MGR	Kevin S. Grossfeld	200 S. Biscayne Blvd, Suite 3600,	
		Miami, FL 33131	Remove
			Change
MGR	Jeffrey Grossfeld	200 S. Biscayne Blvd, Suite 3600,	Add
		Miami, FL 33131	Remove
			Change
			
			□ Remove
			Change
			Add
			☐ Remove
			⊙ □ Add
			☐ Remove
			Change
			Add
			Remove
			☐ Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)	
	
	
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	-
	b: 12
Iffective date, if other than the date of filing:	orsuant to 605.0207
e record specifies a delayed effective date, but not an effective time, at 12:01 a.m. or The 90th day after the record is filed.	n the earlier o
Pated JULY 5 . 2018 .	<u>_</u> _
Signature of a member or authorized representative of a member	

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Filing Fee: \$25.00