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SECRETARY OF STATE

D. BRUCE
SEP 28 2012
EXAMINER

COVER LETTER

 $G_{\bullet}Y^{*}$

то:	Registration S Division of Co					
SUBJI	ECT:	M	JPM LLC			
		Name of Lim	ited Liability Company			
The en	closed Articles of	f Amendment and fee(s) are sul	omitted for filing.			
Please	return all corresp	oondence concerning this matter	to the following:			
Gregory R. Fishman						
			Name of Person			
		Gr	Gregory R. Fishman, PA			
Firm/Company			Firm/Company			
		2750	2750 NE 185 Street, Ste. 302			
			Address			
			Aventura, FL 33180		12 SEI	
			City/State and Zip Code			' ' '
			greg@grfpa.com		SEP 27 AM ECRETARY OF LAHASSEELF	
		tion)	NY C	元音		
For fur	ther information	concerning this matter, please of	all:		<i>⊢∽</i> =	D VEIJ
		reg Fishman	at (305) 79 Area Code & Daytime T	92-6945	:47 TALE ORIDA	
Enclose		the following amount:		-		
	.00 Filing Fee	[]\$30.00 Filing Fee &	\$55.00 Filing Fee &	\$60.00 Filing Fee,		
₩ ₩		Certificate of Status	Certified Copy (additional copy is enclosed)	Certificate of Sta Certified Copy (additional copy	atus &	

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**

MJPN				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on jability Company)	our records.)		
(*** 10.144 2.111104 2	simestify company)			
The Articles of Organization for this Limited Liability Company	were filed on	9/05/12	and assigned	
Florida document number L12000114074				
This amendment is submitted to amend the following:				
A. If amending name, enter the new name of the limited liab	ility company horat			
A. If amending name, enter the new name of the minted hab	mity company nere.			
The new name must be distinguishable and end with the words "Limi	ited 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)				
			12 (
			登 节	
Enter new mailing address, if applicable:			FII AR AR SS	
(Mailing address MAY BE A POST OFFICE BOX)			TO S MOS	
			53 =	
B. If amending the registered agent and/or registered of	fice address on our	records, enter	the name of the new	
registered agent and/or the new registered office address her	<u>e</u> :			
Name of New Registered Agent:				
New Registered Office Address:				
	Enter Florida street address			
	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, <u>enter the title, name, and address of each Manager or Managing Member being added or removed from our records</u>:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGRM	Jorge Hector Guevara	2750 NE 185 ST., STE, 302 AVENTURA FL 33180 US	
MGRM_	Marta Rosa Marinuchi	2750 NE 185 ST., STE. 302 AVENTURA FL 33180 US	Add Remove
			Add Remove
			Add Remove
	<u> </u>		Add Remove
<u> </u>			Add Remove
D. If amend ————————————————————————————————————	ling any other information, enter cha	ange(s) here: (Attach additional sheets, if necessar	12 SEP 27 AM II: 4 SECRETARY OF STATE TALLAHASSEE, FLORIDE
Dated	September 24 ,	2012	ADE -
	(onber or authorized representative of a member Gregory R. Fishman ped or printed name of signee	

Page 2 of 2

Filing Fee: \$25.00