112000123973

(Requ	estor's Name)		
(Addre	ess)	_	
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(City/S	State/Zip/Phon	e #)	
PICK-UP	☐ WAIT	MAIL	
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JAN 1 3 2013 T. HAMPTON

COVER LETTER

TO: Registration Section

Division of Corporations

J & J FL INVESTMENTS 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:

ELIESER GONZALEZ

Name of Person

J & J FL INVESTMENTS LLC

Firm/Company

3167 W 70TH TER

Address

Hialeah, FL 33018

City/State and Zip Code

kaelectriccorp@gmail.com

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

For further information concerning this matter, please call:

JOSE L. GONZALEZ, JR

at (305) 219-0502

Name of Person

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)

2\$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 Tallahassec. FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION **OF**

J & J FL INVESTMENTS LLC

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

(A	riorida Eminied Etability Company	,		
The Articles of Organization for this Limited Lie Florida document number L12000123973	ability Company were filed on 0	9/28/2012	and assi	gned
Florida document number	 •			
This amendment is submitted to amend the follows:	-		2014 JAN SECRET TALLAHA	$\neg 1$
A. If amending name, enter the new name of	the limited liability company h	<u>ere</u> :	502	
			ن جيري -	
The new name must be distinguishable and end with	the words "Limited Liability Com	pany," the designation	"ITIC" or thea	bbroviation
"L.L.C."				
Enter new principal offices address, if applica	shlar		3.574 0.574 0.574	
• • •			-5: 8	
(Principal office address MUST BE A STREE	T ADDRESS)			
Enter new mailing address, if applicable:				
				
(Mailing address MAY BE A POST OFFICE I	<u></u>			
			·· •	
B. If amending the registered agent and/o	or registered office address on	our records, enter	the name of	f the nev
registered agent and/or the new registered of				
Name of New Registered Agent:	ELIESER GONZALEZ			
Name of New Registered Agent.				
New Registered Office Address:	7750 W 24 AVE UNIT 24	4		
	Enter Florida street address			
	HIALEAH	, Florida 🤇	33018	
	City	, Fiorida_	Zip Code	
New Registered Agent's Signature if changing D	egistored 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 60% 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 <u>1</u>	ype of Action
MGRM	JOSE L GONZALEZ	7750 W 24 AVE UNIT 24	Add
		Hialeah, FL 33018	Remove
MGRM	JULIA GONZALEZ	7750 W 24 AVE UNIT 24	- Add
		Hialeah, FL 33018	Remove
MGRM	ELIESER GONZALEZ	7750 W 24 AVE UNIT 24	- Add
	•	Hialeah, FL 33018	Remove
MGRM	JOSE L. GONZALEZ, JR	7750 W 24 AVE UNIT 24	✓ Add
		Hialeah, FL 33018	Remove
			Add
		TALL AH	Remove
			Add T
			Remove

D. If amending any other information	on, enter change(s) here: (Attach additional sheets, if i	iecessary.)
D 1 00	0040	
Dated December 23	2013	
Elleszr	Consider ture of a member or authorized representative of a member	
ELIESER GONZ	ALEZ	

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

FILED
2014 JAN -9 PM 3: 00