

L12 000 143572

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

PICK-UP WAIT MAIL

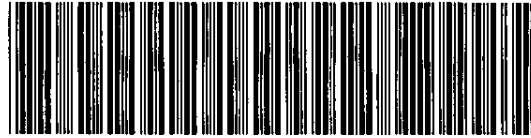
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300263642703

09/19/14--01029--003 **30.00

FILED
14 SEP 19 PM 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

PAULINE ILANA FAJERAIZEN
CEO

September 17, 2014

Customer Services
Florida Department of State
Tallahassee, Florida

Re: AMENMENT TO THE COORPORATION
JEALMA LLC

Attached to this letter will sent the new application with the appropriate fee, please if the earlier transaction is found, please cancel it, I appreciate for their help in processing the documents correctly. If necessary you need can freely contact me my cell phone 561-371-9509.

E-MAIL PAULINEFAJERAIZEN@GMAIL.COM

Sincerely,


Pauline Ilana Fajeraizen

interjuridicalservicesilana@gmail.com and paulinefajeraizen@gmail.com

561-371-9509

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JEALMA LLC

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:

PAULINE ILANA FAJERAIZEN

Name of Person

GUCOVSKI JURIDICAL SERVICES AND INVESMENTS

Firm/Company

2851 NE 183 ST SUITE 2006

Address

AVENTURA, FL 33160

City/State and Zip Code

interjuridicalservices.ilana@gmail.com

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

For further information concerning this matter, please call:

Ilana Pauline Fajeraizen

Name of Person

at (**561**) **371-9509**

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**

JEALMA.LLC

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

The Articles of Organization for this Limited Liability Company were filed on 11/14/2012 and assigned Florida document number L12000143572.

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

GURCOVCHI,FAJERAIZEN INTERNATIONAL SERVICES,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:

2851 NE 183 ST SUITE 2006

(Principal office address MUST BE A STREET ADDRESS)

AVENTURA, FLORIDA

Enter new mailing address, if applicable:

2851 NE 183 ST SUITE 2006

(Mailing address MAY BE A POST OFFICE BOX)

AVENTURA FLORIDA 33160

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:

ILANA PAULINE FAJERAIZEN

New Registered Office Address:

2851 NE 183 ST SUITE 2006

Enter Florida street address

AVENTURA

City

Florida 33160

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.

Ilana Pauline Fajeraizen
If Changing Registered Agent, Signature of New Registered Agent

SECRETARY OF STATE
TALLAHASSEE, FLORIDA
14 SEP 19 PM 3:36
FILED

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager
 AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	ARIEH MOISES GUCOVSKI	2851 NE 183 ST	<input checked="" type="checkbox"/> Add
		SUITE 2006	<input type="checkbox"/> Remove
		AVENTURA,FLORIDA	
MNG	SHIRLEY NANCY BERTINO	2851 NE 183 ST	<input checked="" type="checkbox"/> Add
		SUITE 2006	<input type="checkbox"/> Remove
		AVENTURA,FL 33160	
PRESIDENT	PAULINE ILANA FAJERAIZEN	2851 NE 183 ST	<input checked="" type="checkbox"/> Add
		SUITE 2006	<input type="checkbox"/> Remove
		AVENTURA,FL 33160	
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

FILED
 24 SEP 19 PM 3:36
 SECRETARY OF STATE
 TALLAHASSEE, FLORIDA

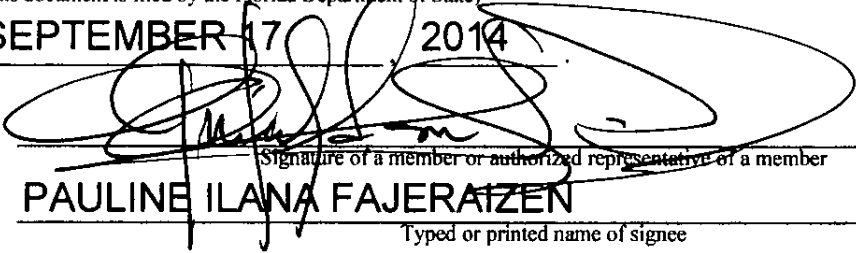
D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

NO ADDITIONAL INFORMATION AVAILABLE IS ONLY A REORGANIZATION OF THE COMPANY

E. Effective date, if other than the date of filing: _____ (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated SEPTEMBER 17 2014


Signature of a member or authorized representative of a member
PAULINE ILANA FAJERAIZEN
Typed or printed name of signee

FILED
14 SEP 19 PM 3:36
SECRETARY OF STATE
TALLAHASSEE, FLORIDA