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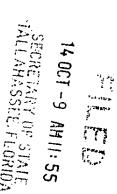
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COVER LETTER

TO:	Registration Section
	Division of Corporations

SUBJECT: JA

TJAC Boca, 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:

Christina Lucht, FRP

Name of Person

Loren Law Firm

Firm/Company

7111 Fairway Drive, Suite 302

Address

Palm Beach Gardens, FL 33418

City/State and Zip Code

clucht@lorenlawfirm.com

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

For further information concerning this matter, please call:

Christina Lucht, FRP

...561\.801-3903

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) ■ \$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

IJAC Boca, LLC			
(Name of the Limited Liability (A Florida)	y Company as it now appears on our records.) Limited Liability Company)		
The Articles of Organization for this Limited Liability Co Florida document number <u>L13000017477</u>	ompany were filed on 2/1/2013	and ass	signed
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limit	ted liability company here:		
The new name must be distinguishable and end with the words "Lim	ited Liability Company," the designation "LLC" or th	e abbreviation "	L.L.C."
Enter new principal offices address, if applicable:			
(Principal office address MUST BE A STREET ADDRI	ESS)		
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered agent and/or the new registered office addr		er the name	of the new
Name of New Registered Agent:		*** B	
New Registered Office Address:	Enter Florida street address	ANNAL.	Chromat Chromat T
	, Florida	<u> </u>	77
New Registered Agent's Signature, if changing Registered	City I Agent:	Zip Gode	Town the same of t
I hereby accept the appointment as registered agent a		SE O	ply 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 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>	Address	Type of Action
MGR	Zvi Schwarzman	7355 Mandarin Drive	
		Boca Raton, FL 33433	Remove
MGR	Mark Greene	66 Calle Washington	□ Add
7		San Juan, Puerto Rico 00907	■ Remove
AMBR	TJAC Waterloo, LLC	c/o SIS Property Management	 ■ Add
		930 Commonwealth Avenue	☐ Remove
		Boston, MA 02215	
MGR/AMBR	TJAC Fountains, Inc.	6901 SW 18th Street, Suite E105	SEC_ E dod
		Boca Raton, FL 33433	C C C C C C C C C C C C C C C C C C C
		TL	(/)
			□ Remove
			□ Add
			□ Remove

If amending any other information, enter change(s) here: (Attach addition)	onal sheets, if necessary.)
Effective date, if other than the date of filing: The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be the date this document is filed by the Florida Department of State)	(optional) be more than 90 days after
Dated October 6 2014	
valcu	
Mul	
Signature of a member or authorized representative Zvi Schwarzman	of a member

Page 3 of 3

Filing Fee: \$25.00

SECREMARY OF SIAIS.