V

13000048199

(Requestor's Name)
(Address)
(Address)
(133.555)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Cartification of Status
Certified Copies Certificates of Status
Special Instructions to Filing Officer:
<u> </u>





500251446635

09/11/13--01027--008 **25.00

2813 SEP 11 PM 5: 24

B. BOSTICK
SEP 1 2 2013
EXAMINER

COVER LETTER

TO:

Registration Section
Division-of Corporations

BIRCT. JAZATLANTA 519, 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:

Sam Jazayri

Name of Person

JazAtlanta 519, LLC

Firm/Company

3001 W. Hallandale Beach Blvd #300

Address

Pembroke Park, FL 33009

City/State and Zip Code

sam.jazayri@yahoo.com

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

For further information concerning this matter, please call:

Sam Jazayri

,,,954,981-11**5**4

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

	City	Zip Code
		Florida
New Registered Office Address:	Enter Florid	la street address
Now Produced Office Address		
Name of New Registered Agent:		
registered agent and/or the new registered office and	ress here:	
B. If amending the registered agent and/or registered agent and/or the new registered office add	tered office address on our recor	ds, enter the name of the new
		OR 5.
		1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
(Mailing address MAY BE A POST OFFICE BOX)		WAS -
Enter new mailing address, if applicable:		2017
		NO NO PER E
		201 TA1
(Principal office address MUST BE A STREET ADDR	RESS)	
Enter new principal offices address, if applicable:		
The new name must be distinguishable and end with the wor "L.L.C."	ds "Limited Liability Company," the de	signation "LLC" or the abbreviation
A. If amending name, enter the new name of the limi	ted liability company here:	
This amendment is submitted to amend the following:	, <i>'</i>	
Florida document number	_•	·
Florida document number L13000048199	ompany word mod on	
The Articles of Organization for this Limited Liability Co	ompany were filed on April 1, 201	3and assigned
(A Florida L	Company as it now appears on our re imited Liability Company)	·
		ecords.)
1474	TLANTA 519, LLC	

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, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Rene Sanchez	3001 W. Hallandale Beach Blvd #30	OO Add
		Pembroke Park, FL 3300	9 Remove
	· 		Add
-			Remove
·			
			Remove
			the state of the s
		=======================================	→ CAdd
			Remove
	•		
	e e e e e e e e e e e e e e e e e e e		
			Remove
	,		Add
		•	_ Remove

ending any other information	1, enter change(s) here: (Attach additional sheets, if necessary
September 10	2013
<	
Signati	ure of a member or authorized representative of a member
Sam Jazayri, Mai	naging Member
	Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

2013 SEP 1 1 PM 5: 24