## L13000061760

(Re	equestor's Name)	
(Ad	Idress)	
(Ad	ldress)	
(Cil	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bı	siness Entity Nar	me)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





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AMARILA PHILL
SECTOR AND SECTION SECTI

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## **COVER LETTER**

	Registration Se Division of Co			
SUBJEC	NJ & HJ L T:			
JOBSEC	.1		nited Liability Company	
The enclo	osed Articles of	Amendment and fee(s) are sub-	omitted for filing.	
Please ret	turn all correspo	ondence concerning this matter	to the following:	
		HICHAM JIHADI		
			Name of Person	
		NJ & HJ LLC		
			Firm/Company	
		24841 SIENA DR		
			Address	
		LUTZ, FL 33559		
			City/State and Zip Code	
		tampatangier@yahoo.com		
			to be used for future annual report notif	lication)
For furthe	r information c	oncerning this matter, please c	all:	
НІСНАМ	LJIHADI		at ()	
	Name of	f Person	Area Code Daytime	: Telephone Number
Enclosed i	is a check for th	e following amount:		
\$25.00	9 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

NJ & HJ LLC		
( <u>Name of the Limited Liabilit</u> (A Florida	y Company as it now appears on our records.) Limited Liability Company)	<del></del>
The Articles of Organization for this Limited Liability C	ompany were filed on 04/29/2013	and assigned
Florida document number L13000061760	<u>_</u> .	
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limi	ted liability company here:	
The new name must be distinguishable and contain the words "Limitation of the contain the words "Limitation of the contain the words "Limitation".	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 ADDR	<u>ESS)</u>	2019 SEC
		ACC TAR
T		N
Enter new mailing address, if applicable:		SSC P
(Mailing address MAY BE A POST OFFICE BOX)		
		73 -
B. If amending the registered agent and/or regist registered agent and/or the new registered office addresses	ered office address on our records, <u>e</u> ess <u>here</u> :	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
<del></del>	, Florid	Zip Code
	C+ij.	ли соас

## 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.

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	NOURDDINE JIHADI	2102 BLIND POND AVE	
		LUTZ, FL 33549	☐ Remove
			Change
		<del>-</del>	Add
			☐ Remove
		<del>-</del>	Change
	<del>.</del>		
			□ Remove
		<del></del>	□ Change
<del></del>			Add
		☐ Remove	
	<del></del>	Change	
		□ ∧dd	
	-	□ Remove	
	<del></del>	☐ Change	
			□ Remove
			☐ Change

•	
E. Effect	ive date, if other than the date of filing:
Note:	fective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.026. If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed an ent's effective date on the Department of State's records.
If the re (b) The	cord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
Dated	March 11th 2019
	12/1/2/2/2

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Typed or printed name of signee

Filing Fee: \$25.00