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(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

AUG - 5 2013

J. BRYAN

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JAG Property Holdings II, LLC position change
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:

Julia Gomez
Name of Person

Firm/Company

16500 NW 86 Court
Address

Miami Lakes, FL 33016
City/State and Zip Code

Julie @ expscenter.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Jonathan Gomez at (305) 519-8222
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

JAG Property Holdings II, LLC

Page 1 of 3

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on the abbreviation

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>	<u>Address</u>	<u>Type of Action</u>
MGR	Julia Gomez	16500 NW 86 Court, Miami Lakes, FL 33016	☐ Add ☒ Remove
MGR	Jonathan Gomez	16500 NW 86 Court, Miami Lakes, FL 33016	☐ Add ☒ Remove
MGRM	Julia Gomez	16500 NW 86 Court, Miami Lakes, FL 33016	☒ Add ☐ Remove
MGRM	Jonathan Gomez	16500 NW 86 Court, Miami Lakes, FL 33016	☒ Add ☐ Remove
			☐ Add ☐ Remove
			☐ Add ☐ Remove

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

Dated _____, _____.



Signature of a member or authorized representative of a member

Jonathan Gomez

Typed or printed name of signee

Page 3 of 3

Filing Fee: \$25.00

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