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## **COVER LETTER**

TO:

Registration Section

Division of Cor	porations		•
our incr	iBusine	S7 LLC	
SUBJECT:		ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	VERONIGO	ROTIO - DESMO	DUTEIX
		Name of Person	<del></del>
	ibus	SIMESZ LLC	
		Firm/Company	
	3021 500	0 1 1 1 1 1 1 2 2 2 2 2	21 2 "
		Address	<u> </u>
		Addiess	
	SUNNI	SE F. 33322 City/State and Zip Code	_
	Verson	to be used for future annual report not	7. com
	E-mail address: (	to be used for future annual report not	ification)
For further information of	concerning this matter, please co	all:	
VERONICA	()(5.T)	954 99	30015
	3 101.3110	at ( ) Area Code Daytin	- The base New York
Name o	of Person	Area Code Daytin	ne Telephone Number
Enclosed is a check for t	he following amount:		
	,		m
□ \$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addres		Street Address:	
Registration 1		Registration Se	
Division of C P.O. Box 632	-	Division of Cor The Centre of T	•
Tallahassee,			oe Street, Suite 810
rananassee,	FL 32314	2413 IN. MIGHIO	be street, suite 810

Tallahassee, FL 32303

## TO ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

	JESZ, LLC
( <u>Name of the Limited Lia</u> (A Flo	ability Company as it now appears on our records.)  orida Limited Liability Company)
The Articles of Organization for this Limited Liability	y Company were filed on 352013 and assigned
This amendment is submitted to amend the following	r. D
A. If amending name, enter the new name of the l	limited liability company here:
The new name must be distinguishable and contain the words "I	Limited 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 AD	12
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	REMAIN THE SAME
B. If amending the registered agent and/or registe agent and/or the new registered office address her	ered office address on our records, <u>enter the name of the new registered</u> re:
Name of New Registered Agent:  New Registered Office Address:	3423 NW 7446 ST Enter Florida street address
	MIAMI, Florida 33166  City Zip Code
	cny sp 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.

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
			□Add
			□Remove
			□Add
			□Remove
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TRADING   Suy AND SALE VEHICLES, BOATE  MOTORCY CLES, EXOTIC CAP, ANTIQUE CRRS,  ATV'S, JET SKYS, REGULAR & HERVY DUTY  TRUCKS, RV S, FORK LIFTS, TRAILERS, DIRT  BIKES, DEDIVIN DUTY / Bux TRUCKS, INDUSTRIAN  EQUIPMENT  tive date, if other than the date of filing:  1	and a start Oliva	URPOSE FOR WHICH T	THIS LLC IS
MOTORCY CLES, EXOTIC CAR, ANTIQUE CARS, ATV'S, TET SKYS REGULAR & I-JERNY DUTY TRUCKS, RV'S FORK LIFTS, TRUCKS, DIRT BIKES MEDIUM DUTY/Bux TRUCKS, INDUSTRIAN, EQUIPMENT  tive date, if other than the date of filing:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.  Signature of a member of authorized representative of a member  Signature of a member of authorized representative of a member			
TRUCKS RV & FORK LIFTS, TRUCKS, DIRT  BIKES MEDIUM DUTY BUX TRUCKS, INDUSTRIAN  EQUIPMENT  tive date, if other than the date of filing:  If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be ment's effective date on the Department of State's records.  Signature of a member of authorized representative of a member  Signature of a member of authorized representative of a member	TRADING   BUY	AND SALE VEHICL	ES, BOATS
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tive date, if other than the date of filing:    1	BIKES NEDIUC	1 DUTY/BUX TRUCKS	, INDUSTRIAL
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