## Florida Department of State

Division of Corporations Electronic Filing Cover Sheet

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(((H170001834883)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : BALDY MARTINEZ P.A.

Account Number : I20110000042 : (305)454-5804

Phone Fax Number : (305)454-5808

ater the email address for this business entity to be used for future annual report mailings. Enter only one email address please.\*\*

imail	Address:	 ·	 	 

## LLC AMND/RESTATE/CORRECT OR M/MG RESIGN JS DELTA INVESTMENTS LLC

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Corporate Filing Menu

Help

S. WARREN

JUL 1 4 2017

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From: Baldy Martinez

\*Fak: (306) 615-1371

To:

Fav: 4350; 517-5383

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## COVER LETTER

TO:	Registration Section Division of Corporations		
	JS DELTA INVESTMENTS,	LLC.	
SUBJE	CT: Name of Li	mited Liability Comp	pany
Dear Sir	r or Madam		
The enc	losed Amendment or Cancellation of Staten	nent of Authority and	fcc(s) are submitted for fiting.
Please r	eturn all correspondence concerning this ma	itter to the following:	
Baldy	Martinez, Esq.		
	Name of Person		
Baldy	Martinez, P.A.		
	Firm/Company		
1999	S.W. 27th Avenue, 1st Floor		
	Address		
Miam	i, FL 33145		
	City/State and Zip Code		
bm@	baldylaw.com		
	H-mail address: (to be used for future annu-	al report notification	)
For fur:	her information concerning this matter, plea	ise call:	
Baldy	Martinez, Esq.	at ()	454-5804
	Name of Person	Arca Code	Daytime Telephone Number

STREET/COURTER ADDRESS: Registration Section Division of Corporations

Clifton Building 2661 Executive Center Circle Tallahassee, Florida 32301 MARLING ADDRESS: Registration Section Division of Corporations P.O. Box 6327 Tallahassee, Florida 32314

CR2E145 (2/14)

From Baldy Martinez

Fax: (305) 615-1371

To:

Fas: (850) 617-6382 PM 3 -of 3 -of 3 -07/13/2017 2 05 PM 3

## AMENDMENT OR CANCELLATION OF STATEMENT OF AUTHORITY

Pursuant	to section 605.0302(2), Florida Statutes, this limited liabilit. The name of the limited liability company is: JS DELTA	y company submits the foll A INVESTMENTS, LL	owing	3:	
SECONI	D: The Florida Document number of the limited liability con	mpany is: L130001440	93		
THIRD:	The street address of the limited liability company's princi 10820 S.W. 136th Court	pal office is:			
-	Miami, FL 33186		· ·		
•	The mailing address of the limited Hability company's print 10820 S.W. 136th Court	ncipal office is:			
	Miami, FL 33186			•	
FOURT	I: The date the statement of authority became effective is:	June 4th, 2015			
FIFTH:	The statement of suthority is cancelled.		•	<b>17</b> JUL	
	The amendment to the statement of authority is			7 JUL 13 AH 10:	77
-			200	): 23	
	Jorge N. Sliva Martin				
Signaturo	pt antholized representative  Filing Fee: \$25.00  Certified Cupy: \$30.00		of si	gnatur	·e

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