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T. HAMPTON

COVER LETTER

TO: **Registration Section Division of Corporations** M.E.J.E. INVESTMENTS 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: ELIZABETH D. RODRIGUEZ Name of Person Firm/Company 1912 NW 5 PLACE Address MIAMI, FL 33136 City/State and Zip Code E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: ALEX MONTERO

Name of Person

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

M.E.J.E. INVESTMENTS LLC

(Name of the Limited Liability Company as it now appears on our records.)

(A Florida Limited I	Liability Company)	<u>143.</u>)
The Articles of Organization for this Limited Liability Company Florida document number <u>L14000033006</u> .	were filed on 02/26/2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and end with the words "Limited Liab	nility Company," the designation "L	JLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRESS)		7014 7014
		岩质 多 1
		S 5 F
Enter new mailing address, if applicable:		m g m
(Mailing address MAY BE A POST OFFICE BOX)		59 f
Manning municipality BETT 1 COT OF THE BOTT		56 0
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B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here Name of New Registered Agent:		ds, enter the name of the
A A A A A A A A A A A A A A A A A A A		
New Registered Office Address:	Enter Florida street addr	
	Liner I tortuu sireet uuur	633
		Florida
	City	Zip 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 Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member being added or removed from our records:

MGR = Manager

AMBR = Authorized Member Title Name **Address Type of Action 170 NE 29 STREET AMBR** JOAQUIN M. GONZALEZ **■** Add MIAMI, FL 33137 ☐ Remove 1912 NW 5 PLACE **EDY NOEL MEJIA** MGR Add MIAMI, FL 33136 ☐ Remove **EDDIE MEJIA** 1912 NW 5 PLACE MGR ☐ Add MIAMI, FL 33136 Remove □ Add Remove PR Remove ☐ Add

If amending any other information, enter change(s) here: (Attach addition	
·	
Effective date, if other than the date of filing: 04/09/2014 The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be the date this document is filed by the Florida Department of State)	(optional) more than 90 days after
Dated 4-1/-14,	
Marine Samola	
Signature of a member of authorized representative of	a member

Page 3 of 3

Filing Fee: \$25.00

2014 APR 15 PM 4: 10