*L14000048734

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K. SALY EXAMINER DEC 2 2 2014

COVER LETTER

	Registration Sec Division of Corp			y.
SUBJEC	SLJ HOL	DINGS, LLC		
SUBJEC	· I :	Name of Lim	ited Liability Company	
The encl	osed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	turn all correspoi	ndence concerning this matter	to the following:	
		SUSAN L. JACOBS		
		- ' 	Name of Person	
		SLJ HOLDINGS, LL	С	
			Firm/Company	
		950 BRICKELL BAY	DRIVE, APT 4204	
			Address	
		MIAMI, FL 33131		
		SLJAC@OUTLOOK.	City/State and Zip Code	
		E-mail address: (to be used for future annual report notifi	cation)
For furth	er information co	oncerning this matter, please co	all:	
SUSA	N JACOBS		646 288-1377	
	Name of	Person		Telephone Number
Enclosed	l is a check for th	e following amount:		
2 \$25.0	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)
	MAILI	NG ADDRESS:	STREET/COURIE	ER ADDRESS:

Registration Section
Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building 2661 Executive Center Circle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

FIL	-E	D
2014 DEC 16	PĦ	1:5

SLJ HOLDINGS, LLC (Name of the Limited Liability Company as it now appears on our records) LAHASSEF The Articles of Organization for this Limited Liability Company were filed on 03/25/2014 and assigned Florida document number _L14000048734 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C." Enter new principal offices address, if applicable: 950 BRICKELL BAY DRIVE, APT 4204 (Principal office address MUST BE A STREET ADDRESS) MIAMI, FL. 33131 950 BRICKELL BAY DRIVE, APT 4204 Enter new mailing address, if applicable: MIAMI, FL 33131 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

, Florida

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: FILED MGR = Manager · AMBR = Authorized Member 2014 DEC 16 PM 1:54 Type of Action Title Name **Address** TALLAHASSEE. FLORIDA □ Add ☐ Remove _□ Add _____ Remove ____ Add ☐ Remove □ Add ☐ Remove □ Add ____ 🗆 Remove □ Add ☐ Remove

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TO 950 BRICKELL BAY DRIVE, APT 4204, MI	IAMI, FL 33131
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Duan L Jacker	

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