# L14000055742

(Red	questor's Name)	
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Amend

APR 28 2020 I ALBRITTON

## **COVER LETTER**

TO:

Registration Section
Division of Corporations

JDGE LLC SUBJECT:				
30D3LC1	Name of Lin	ited Liability Company	9. 9 <del>.</del>	
	,		e almana 11	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please return all correspo	ondence concerning this matter	to the following:		
	Daniela Wulff			
	<u></u>	Name of Person	· <del></del>	
	JDGE LLC			
		Firm/Company		
	55 Ocean Lane Dr Apt 3	3035		
	· · · · · · · · · · · · · · · · · · ·	Address	<del></del>	
	Key Biscayne FL 33149			
	<del></del>	City/State and Zip Code	<del></del>	
	annamariajdge@gmail.co	om		
	E-mail address: (	to be used for future annual report notif	fication)	
For further information c	oncerning this matter, please c	all:		
Daniela Wulff		305 9050878		
Name of Person		at ()	e Telephone Number	
Enclosed is a check for t	he 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 Addres		Street Address:		
Registration Section		Registration Sec		
Division of Corporations		Division of Corporations		
P.O. Box 632		The Centre of T		
Tallahassee,	FL 32314	2415 N. Monroe Street, Suite 810		

RECEIVED MAR 2 3 2020

Tallahassee, FL 32303



2020年7月24 新 7:52

Letter Number: 320A00007306

### FLORIDA DEPARTMENT OF STATE Division of Corporations

April 3, 2020

DANIELA WULFF 55 OCEAN LANE DR APT. 3035 KEY BISCAYNE, FL 33149

SUBJECT: JDGE LLC

Ref. Number: L14000055742

We have received your document for JDGE LLC, however, upon receipt of your document no check was enclosed. Please return your **document** along with a **check** or **money order** made payable to the Department of State for \$25.00.

The document must also contain the address of the registered agent which must be at a Florida street address.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Irene Albritton
Regulatory Specialist II

www.sunbiz.org

Division of Commentions D.O. DOV 6207 Tellaharma Florida 2021

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JDGE LLC		
(Name of the Limi	ited Liability Company as it now appea (A Florida Limited Liability Company)	rs on our records.)
The Articles of Organization for this Limited L. Clorida document number L14000055742	iability Company were filed on M	arch 17, 2020 and assigned
his amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company h	<u>ere</u> :
he new name must be distinguishable and contain the	words "Limited Liability Company," the	designation "LI.C" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
Principal office address MUST BE A STREI	ET ADDRESS)	
		020
Enter new mailing address, if applicable:	·	
(Mailing address MAY BE A POST OFFICE BOX)		
		=
3. If amending the registered agent and/or gent and/or the new registered office addre		records, enter the name of the new register
Name of New Registered Agent:	Daniela Wulff	
New Registered Office Address:	55 Ocean Lane Dr Apt 303	5
	Enter Flo	rida street address
	Key Biscayne	, Florida 33149
	Cuy	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 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>	<u>Address</u>	Type of Action
AMBR	GUSTAVO RODRIGUEZ	88 CHESAPEAKE AVENUE TAMPA FL 33606	□Add
		<del></del>	=Remove
			□Change
AMBR	JORGE STUYCK	55 OCEAN LANE DR APT 3035	□Add
		KEY BISCAYNE FL 33149	=Remove
			□Change
			□Add
			Remove
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an effective ote: If the	date is listed, the date inserted in	date must be specif n this block does	fic and cannot be pr	ior to date of filing or licable statutory fil		ter filing.) Pursuant to 6 his date will not be li	
record spec is filed.	cifies a delayed	effective date, bu	ut not an effective	e time, at 12:01 a.n	n. on the earlier of:	(b) The 90th day af	ter the
MAR	CH 17TH		2020				
				0	)		

Filing Fee: \$25.00

Typed or printed name of signee