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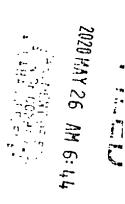
(Requestor's Name)
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JUN 1 5 2020 S. YOUNG

COVER LETTER

Registration Section

Tallahassee, FL 32314

TO:

Division of Cor	porations		
JEMAC R	EBUILDING LLC	<i>3</i>	•
SUBJECT:	Name of Limi	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:	
	ANA CRISTINA IONI		
		Name of Person	
	800 SE 4TH AVE SUITE	Firm/Company 808B	
		Address	
	HALLANDALE BEACH		
		City/State and Zip Code	
		NIREALESTATTEMIAMI. to be used for future annual repo	
For further information c	concerning this matter, please ca	all:	
ANA C	RISTINA IONI	310 69141	48
Name o	of Person	at () Area Code D	Daytime Telephone Number
Enclosed is a check for the	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 Addre	
Registration (Division of C		Registratio Division of	n Section f Corporations
P.O. Boy 632	•		of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

20

JEMAC REBUILDING LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	26
The Articles of Organization for this Limited Liability Company Florida document number <u>L14000094906</u>	were filed on06/12/2014	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 contain the words "Limited Liabil	lity Company "the designation "LLC" o	r the abbreviation "L.L.C."
-	10036-10038 NW 80 AVE	
Enter new principal offices address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	HIALEAH GARDENS FL, 333	16
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered office a	address on our records, enter th	e name of the new register
agent and/or the new registered office address here:		
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	, Flori	ida
	Cuy	Zıp 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 adde or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	ALIEXANDER BELTRAN ROMERO		🗆 Add
			□Remove
		5946 MUSTANG MANOR DAVIE FL 33314	Change
AMBR	ALEXANDER BELTRAN ROMERO		□Add
		 	□Remove
		5946 MUSTANG MANOR DAVIE FL 33314	≣ Change
			□Add
		<u> </u>	□ Remove
			Change
		□Add	
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□ Remove
			□ Change

ND THE NEW OFFICE'S ADDRESS IS: 036-10038 NW 80 AVE HIALEAH GARDENS FL, 33316
036-10038 NW 80 AVE HIALEAH GARDENS FL, 33316
date, if other than the date of filing:
pecifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the
1AY 05 2020
Folial ()
Signature of a member or authorized representative of a member

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