L14 600 104258

uestor's Name)	
ress)	
ress)	
/State/Zip/Phon	e #)
WAIT	MAIL
iness Entity Nar	me)
ument Number)	1
Certificates	s of Status
iling Officer:	
	ress) /State/Zip/Phon WAIT iness Entity Nai ument Number)

Office Use Only



500263032845

500263032845 08/13/14--01023--015 **25.00



COVER LETTER

TO: Registration Sec Division of Corp			
_{subject:} Josa &	50, LLC		
SUBJECT:		ted Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return all correspon	dence concerning this matter	to the following:	
	James Marx		
		Name of Person	
	Marx & Fran	kel, Pa	
		Firm/Company	
	1 Se 3rd Ave Suite 2900		
		Address	
	Miami, FL 33	3131	
		City/State and Zip Code	
	E-mail address: (1	to be used for future annual report no	tification)
For further information co	ncerning this matter, please ca	all:	
James Marx	(at (305)	0276
Name of	Person	Area Code Daytii	me Telephone Number
Enclosed is a check for the	e 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

Josa 50, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	<u></u>
The Articles of Organization for this Limited Liability Company Florida document number L14000104258	were filed on June 30, 2014	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	oility company here:	
The new name must be distinguishable and end with the words "Limited Liab	bility Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	c/o Issemberg Co.,	
(Principal office address MUST BE A STREET ADDRESS)	234 East 58th Street	
	NY, NY 10022	
Enter new mailing address, if applicable:	c/o Issemberg Co.,	
(Mailing address MAY BE A POST OFFICE BOX)	234 East 58th Street	
	NY, NY 10022	
B. If amending the registered agent and/or registered o registered agent and/or the new registered office address her		r the name of the new
<u> </u>		EQ 1 17
New Registered Office Address:	Enter Florida street address	
	, 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 = Ms $AMBR = Au$	anager athorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			☐ Remove
			☐ Remove
			□ Remove
			<u> </u>
			□ Remove
			□ Remove
			□ Remove
			Komo.o

if amending any other information, enter change(s) here: (Attach adattional sheets, if necessary.)
· ·	
	
fective date, if other than the date of filing: e effective date must be specific, cannot be prior to date of receipt or filed	(optional)
e effective date must be specific, cannot be prior to date of receipt or filed to date this document is filed by the Florida Department of State)	date and cannot be more than 90 days after
August 12 2014	
Signature of a member or authorize	ed representative of a member
James Marx	
Typed or printed no	ame of signee

Page 3 of 3

Filing Fee: \$25.00

14 AUS 13 JM 10, 39