

L 14000118655

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

(Document Number)

Certified Copies _____

Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



300264144483

09/17/14--01014--007 **110.00

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS
14 SEP 17 PM 4: 08

C. Lewis
9-24-14

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: JR2 REAL ESTATE 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:

Carol Sousa

Name of Person

Sousa & Associates Inc

Firm/Company

PO BOX 618348

Address

Orlando, FL 32861-8348

City/State and Zip Code

carol@sousanassociates.com

E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Carol Sousa

Name of Person

at (407) 342-6382

Area Code

Daytime Telephone Number

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

FIELD
SECRETARY OF STATE
DIVISION OF CORPORATIONS

14 SEP 17 PM 4:08

Page 1 of 3

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

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGRM	Jose Roberto Belardo Junior	7617 COLBURY AVE	<input type="checkbox"/> Add
		Windermere, FL 34786	<input checked="" type="checkbox"/> Remove
MGRM	Juliana Miranda Coelho	5728 MAJOR BLVD STE 730	<input checked="" type="checkbox"/> Add
		Orlando, FL 32819	<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove

D. If amending any other information, enter change(s) here: *(Attach additional sheets, if necessary.)*

Name change, removal of member and addition of another member are to take place as described above.

FILED
SECRETARY OF STATE
DIVISION OF CORPORATIONS

14 SEP 17 PM 4:08

E. Effective date, if other than the date of filing: 07/29/2014 (optional)

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated September 04, 2014.



Signature of a member or authorized representative of a member

Ricardo Coelho

Typed or printed name of signer