L14000132348

(Re	questor's Name)	
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(Cit	y/State/Zip/Phone	∋ #)
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T. BROWN

COVER LETTER

TO:	r Registra Division	ation of C	Section	n ation
SUBJĒC	:T:		USA	GR

JSA GREEN CARD 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:

	Robbie Hicks		
		Name of Person	
	USA GREEN CAR	LLC	
	-	Firm/Company	
	2455 E Sunrise Blvd	l # 901	
		Address	
	Fort Lauderdale, FL	33304	
		City/State and Zip Code	
	robbieghicks@gmail	.com	
	E-mail address: (to be used for future annual report no	otification)
For further information c	oncerning this matter, please ca	all:	
Robbie Hicks		754 423-475	51
Name o	f Person		ime Telephone Number
Enclosed is a check for the	ne 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**

USA GREEN CARD, LLC

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ARTICLI	ES OF ORGANIZATION	A Comment
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		TOUR TON TO DE
USA (GREEN CARD, LLC	Million Phy
(Name of the Limited Lia) (A Flor	oility Company as it now appears on our records Limited Liability Company)	ords.) PA 2:25
The Articles of Organization for this Limited Liability Florida document number L14000132348	Company were filed on	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the li	mited 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:		
(Principal office address MUST BE A STREET AD)	DRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or re- registered agent and/or the new registered office a		rds, enter the name of the new
Name of New Registered Agent:	8 - No.	
New Registered Office Address:	Enter Florida street add	
	Enter r torida street add	ress
		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:

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	Najat LLC	3881 NW 35 Street	
		Coconut Creek, FL 33066	Remove
-		*****	Add
			□ Remove
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			Remove

MGRCS Amerca	OP LLC 75%	
MGR Straight EC	ommerce, LLC 25%	
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fective date must be specific, te this document is filed by to November 6.	cannot be prior to date of receipt or filed date and cannot be more than 90 date. Florida Department of State)	ptional ays after

Page 3 of 3

Filing Fee: \$25.00