L14000160173

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COVER LETTER

Div	ision of Corp	orations		•
SUBJECT:	CJ EXPR	ESS MARKET LLC		
SCHOLECT.		Name of Lim	ited Liability Company	
The enclosed	1 Articles of A	mendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	dence concerning this matter	to the following:	
		VIRGINIA YAKER		
			Name of Person	
		CJ EXPRESS MARI	KET	
		· · · · · · · · · · · · · · · · · · ·	Firm/Company	
		234 ALMOND AVEN	NUE	
			Address	· · · · · · · · · · · · · · · · · · ·
		FORT LAUDERDAL	.E, FLORIDA 33316	
			City/State and Zip Code	
		JYAKER62@gmail.co		
		E-mail address: (t	to be used for future annual report notific	ation)
For further in	nformation co	ncerning this matter, please ca	all:	
Virginia Y	'aker		860 841-9693	
-	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for the	following amount:		
■ \$25.00 F	iling 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:

TO:

Registration Section

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



FLORIDA DEPARTMENT OF STATE Division of Corporations

May 1, 2015

VIRGINIA YAKER 234 ALMOND AVENUE FORT LAUDERDALE, FL 33316

SUBJECT: CJ EXPRESS MARKET, LLC

Ref. Number: L14000160173

15 MAY IL PH L: 02
SECRETARY OF STATE
TALL AHASSEF FLORIDA

We have received your document for CJ EXPRESS MARKET, LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

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) 245-6051.

Neysa Culligan Regulatory Specialist II

Letter Number: 415A00009012

www.sunbiz.org

FILED

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2015 MAY 14 AM 7: 32 SECRETARY OF STATE TALLAHASSEE, FLORIDA

CJ EXPRESS MARKET LL	С			
(Name of the Limite	ed Liability Compa (A Florida Limited)	ny as it now appears o Liability Company)	n our records.)	
The Articles of Organization for this Limited Lia Florida document number <u>L14000160173</u>	ability Company			and assigned
This amendment is submitted to amend the follo	owing:			
A. If amending name, enter the new name of	the limited liab	ility company here	:	
The new name must be distinguishable and end with the v	words "Limited Liab	ility Company," the des	ignation "LLC" or the ab	breviation "L.L.C."
Enter new principal offices address, if applica	able:	274/	Almond	One
(Principal office address MUST BE A STREE	T ADDRESS)	Font	Lande	dall
		Flow	La 332	18
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE)	BOX)		A	
B. If amending the registered agent and/or the new registered of			ur records, <u>enter</u>	the name of the ne
Name of New Registered Agent:	Virginia Yal	ker		
New Registered Office Address:	234 Almond	d Avenue		
. 19 (1 <u>222 Days 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2</u>		Enter Florida	street address	
	Fort Lauder	rdale	, Florida <u>3</u> 3	316
		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, Sishature of New Registered Agent

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>	Name	Address	Type of Action
AMBR	Virgina Yaker	234 Almond Avenue	≡ Add
		Fort Lauderdale, Florida 33316	□ Remove
AMBR	JADER OLIVEIRA	234 Almond Avenue	Add
		Fort Lauderdale, Florida 33316	Remove
AMBR	CHRISTIAN JACQUES	234 Almond Avenue	Add
		Fort Lauderdale, Florida 33316	Remove
	·		Remove
			Remove
			Pemove

fective date, if other than the date of filing: c effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after date this document is filed by the Florida Department of State)	ıal) ter
ted April 3 2015	
Signature of a member or authorized representative of a member	
VIRGIN NA YAKER	

Page 3 of 3

Filing Fee: \$25.00

