L14000169926

(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
(bocument Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



900356211699

12/09/20--01007--002 **25.00

2020 DEC -9 PH 4: 28

1/21/21

COVER LETTER

TO: Registration Se Division of Cor			
	L INVESMENTS LLC.		
SUBJECT:	Name of Lin	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	RAFAEL VASCONEZ		
		Name of Person	
	REV MULTI SERVICE I	NC	
		Firm/Company	
	16499 NE 19 AVE SUITI	E 218	_
		Address	
	MIAMI, FL. 33162		
		City/State and Zip Code	
	REVMULTISERVICE@A		: C
For Cooking in Community of	E-mail address: oncerning this matter, please c	to be used for future annual report not	писаноп)
For further information c	oncerning this matter, prease c		
RAFAEL VASCONNEZ		305 788 5207 at ()	
Name o	f Person	Area Code Daytin	ne 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 Addres Registration S Division of C P.O. Box 632	Section orporations	Street Address: Registration Se Division of Co The Centre of	rporations
Tallahassee, I			oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJ GLOBAL INVESTMENTS LLC.		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number L14000169926		and assigned
his amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
he new name must be distinguishable and contain the words "Limited Liabil	lity Company," the designation "LLC" or the ab	obreviation "L.L.C."
Enter new principal offices address, if applicable:	1273 NE 92 ST MIAMI, FL. 33138	
Principal office address MUST BE A STREET ADDRESS)		202 0
	1273 NE 92 ST MIAMI, FL. 33138	F11.E
Enter new mailing address, if applicable:	1273 NE 92 ST MIAMI, FL. 33138 SS) 1273 NE 92 ST MIAMI, FL. 33138	3 5
Mailing address MAY BE A POST OFFICE BOX)		- 2 2
3. If amending the registered agent and/or registered office a gent and/or the new registered office address here:	address on our records, <u>enter the nam</u>	e of the new regist
Name of New Registered Agent:		
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 amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	<u>Address</u>	Type of Action
MGR	JUDITH RUIZ	1735 NE 157 TER N. MIAMI BEACH FL. 33162	□Add
			= Remove
			□Change
MGR	JULIO G. GONZALEZ	1273 NE 92 ST MIAMI, FL. 33138	= Add
			Remove
			□ Change
			2020 □ Add
			Remove
		:	☐ Change
			ro O □ □Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□ Change

					, <u>, , , , , , , , , , , , , , , , , , </u>	
		·				
			<u> </u>			
						
						~~~~
						2020 DEC
		_				F   F   F   F   F   F   F   F   F   F
						1 6 1 E
				. <u> </u>		: :: :::::::::::::::::::::::::::::::::
					<u></u>	26
						<del></del>
<del> </del>			<del> </del>		<del></del>	
ffective date, if	other than th	e date of filin	g: 11/30/2020	C. C. Linux out	(0)	otional) fler filing.) Pursuant to 605.0207
ote: If the date i	nserted in this b	block does not i	meet the applic	able statutory fili	ng requirements.	this date will not be listed as
ocument's effecti	ve date on the l	Department of !	State's records.			
			ga	. 12.01		(h) The 90th day after the
	, delayed effect:	ive date, but no	t an effective ti	me, at 12:01 a.m	, on the earner of	(b) The 90th day after the
	•					
record specifies a Lis filed.	·					
	05			<u> </u>		
l is filed.	0 -	<u> </u>	· <u>-</u>	·		
l is filed.	0 -	Signature of a	nember or author	rized representativ	ve of a member	

Filing Fee: \$25.00