1400013378

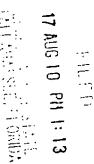
(Requestor's Name)
(Address)
(Address)
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Document Number)
Certified Copies Certificates of Status
Special Instructions to Filing Officer:

Office Use Only



200302286372

-2003022355³73.00



S. WARREN AUG 1 1 2017

COVER LETTER

		orations		
elib iezti.	JPF INVES	TMENT HOLDINGS LLC		
SUBJECT:			ited Liability Company	
The enclosed	Articles of A	Amendment and fee(s) are sub-	mitted for filing.	
Please return	all correspon	ndence concerning this matter	to the following:	
		JONATHAN P. FERRAN	DO	
			Name of Person	
			Firm/Company	
		71 COMPASS ISLE		
		FORT LAUDERDALE. F	Address L 33308	
		ferrandojon@gmail.com	City/State and Zip Code	
			to be used for future annual report notif	ication)
For further in	nformation co	oncerning this matter, please ca	all:	
JONATHAI	NP. FERRAI	NDO	954 614-5544 at () Area Code Daytime	
	Name of	Person	Area Code Daytime	Telephone Number
Enclosed is a	check for th	e 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)

TO:

Registration Section

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

	ted Liability Company as it now app (A Florida Limited Liability Compan	ocars on our_records.) y)
The Articles of Organization for this Limited L Florida document number L14000173278	iability Company were filed on	11/06/2014 and assigned
This amendment is submitted to amend the fol	lowing:	
A. If amending name, enter the new name of	of the limited liability company	here:
The new name must be distinguishable and contain the	words "Limited Liability Company," t	he designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if appli	cable:	
(Principal office address MUST BE A STRE	ET ADDRESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and	l/or registered office address	on our records, enter the name of th
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and	l/or registered office address	
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and registered agent and/or the new registered of New Registered Agent:	l/or registered office address	
(Mailing address MAY BE A POST OFFICE B. If amending the registered agent and registered agent and/or the new registered of	I/or registered office address office address here: 71 COMPASS ISLE	
	I/or registered office address office address here: 71 COMPASS ISLE	on our records, enter the name of the

New Registered Agent's Signature, if changing Registered Agent:

INCOMPRESENT HOLDINGS LLC

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 Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added or removed from our records:

MGR = Ma AMBR = Au	nager thorized Member		
<u>Title</u>	<u>Name</u>	Address	Type of Action
			□ Remove
			Change
			Add
			Remove
			Change
			□ Add
			Remove
			☐ Change
			□ Remove
			Change
.			□ Add
			□ Remove
			Change
			
			Add
			□

			
		· <u>-</u> -	
			
			
	·		· · · · · · · · · · · · · · · · · · ·
			
			
			· · · · · · · · · · · · · · · · · · ·
•			
	<u> </u>		
ctive date, if other	than the date of fili	ng:	(optional)
: If the date inserted	d in this block does not	ng:	(optional) than 90 days after filing.) Pursuant to 60 equirements, this date will not be list
: If the date inserted	than the date of fili the date must be specific a d in this block does not e on the Department of	meet the applicable statutory filing r	(optional) than 90 days after filing.) Pursuant to 60. equirements, this date will not be list
! If the date inserted ment's effective data	d in this block does not e on the Department of	meet the applicable statutory filing restate's records.	equirements, this date will not be list
: If the date inserted ment's effective dat ecord specifies a	d in this block does not e on the Department of	meet the applicable statutory filing no State's records. date, but not an effective time.	equirements, this date will not be list
If the date inserted ment's effective dat a second specifies a e 90th day after	d in this block does not e on the Department of a delayed effective	meet the applicable statutory filing no State's records. date, but not an effective time.	equirements, this date will not be list
If the date inserted ment's effective dat a second specifies a e 90th day after	d in this block does not e on the Department of a delayed effective	meet the applicable statutory filing no State's records. date, but not an effective time.	equirements, this date will not be list
If the date inserted ment's effective dat ecord specifies are 90th day after	d in this block does not e on the Department of a delayed effective	meet the applicable statutory filing no State's records. date, but not an effective time.	equirements, this date will not be list
If the date inserted ment's effective dat a second specifies a e 90th day after	d in this block does not e on the Department of delayed effective the record is filed	meet the applicable statutory filing no State's records. date, but not an effective time.	equirements, this date will not be list
: If the date inserted ment's effective date ecord specifies at e 90th day after date.	d in this block does not e on the Department of a delayed effective r the record is filed Signature of Signat	date, but not an effective time. 2017	equirements, this date will not be list the list
ecord specifies a set of the date inserted at the date of the date of the day after day after day.	d in this block does not e on the Department of delayed effective the record is filed	date, but not an effective time. 2017	a member
ecord specifies a set of the date inserted at the date of the date of the day after day after day.	d in this block does not e on the Department of a delayed effective r the record is filed Signature of Signat	date, but not an effective time. 2017 a mentor or authorized representative of	equirements, this date will not be list the list