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JAN 1 1 2019 S. YOUNG

COVER LETTER

TO:		tration Se ion of Cor			
oun in		& J VENI	EZUELA LLC		
SUBJE	CT: _		Name of Lim	Name of Limited Liability Company	
The enc	losed z	Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please re	eturn a	ll correspo	ndence concerning this matter	to the following:	
			RODRIGUEZ JOSCAR C		
				Name of Person	
			J & J VENEZUELA LLC	J & J VENEZUELA LLC	
				Firm/Company	
			12481 SW 5TH CT		
			DAVIE, FLORIDA 33325	Address	28 PF (SSEE)
			gabriela_nvs@hotmail.com	City/State and Zip Code	1 5: 58
			E-mail address: (to be used for future annual report notification)	
For furth	her inf	ormation c	oncerning this matter, please ca	all:	
JOSCA	R ROI	ORIGUEZ		954 6004738	
 		Name o	l'Person	at ()	umber
Enclose	d is a c	theck for th	ne following amount:		
			☐ \$30.00 Filing Fee & Certificate of Status	Certified Copy Certified Copy (additional copy is enclosed) Certified Certified Certified Certified Certified Certified Certified Copy is enclosed)	00 Filing Fee, tiffeate of Status & tiffed Copy fitional copy is enclosed)
		Registr Divisio	ING ADDRESS: ation Section n of Corporations ox 6327	STREET/COURIER ADDRE Registration Section Division of Corporations Clifton Building	SS:

Tallahassee, FL 32314

Clifton Building 2661 Executive Center Cucle Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J & J VENEZUELA LLC	
(Name of the Limited Liability Compa (A Florida Limited	iny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number 1.15000025672	were filed on $\frac{02/11/2015}{}$ and assigned
This amendment is submitted to amend the following:	
A. If amending name, <u>enter the new name of the limited liab</u>	oility company here:
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	12481 SW 5TH CT DAVIE, FLORIDA 33325
Principal office address MUST BE A STREET ADDRESS)	
Enter new mailing address, if applicable:	12481 SW 5TH CT DAVIE, FLORIDA 3825. 28
Mailing address MAY BE A POST OFFICE BOX)	
	5: 58
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	
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 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 = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	GABRIELA VARGAS	12481 SW 5TH DAVIE FL 33325	
			□ Remove
		<u> </u>	Change
	 		
			□ Remove
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Note:	ve date, if other than the date of filing:
	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: 90th day after the record is filed.
Dated .	12/18/ 20/8
	Signature of a member or authorized representative of a member
	signature of a memory of authorized Chiesespane of a memor

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Filing Fee: \$25.00