## L15000026567

(Requestor's Name)	
(Address)	
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(City/State/Zip/Phone #)	
PICK-UP WAIT MAI	L
(Business Entity Name)	
(Document Number)	
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SECRETARY OF STATE

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## **COVER LETTER**

		ition Sect of Corp			
SUBJEC	JJC	Global T	rading, LLc		
SUBJEC	, I :		Name of Limi	ted Liability Company	
The enclo	osed Art	icles of A	mendment and fee(s) are subi	mitted for filing.	
Please re	turn all c	corréspond	dence concerning this matter	to the following:	
			Christopher Martinez De C	astro	
			ppp de la company de la compan	Name of Person	
			JJC Global Trading, LLC		
				Firm/Company	
			60 West 49th Street		
				Address	4
			Hialeah Fl. 33012		
				City/State and Zip Code	
			c.martinezdecastro@gmail.c		
			E-mail address: (	to be used for future annual report no	tification)
For furth	er inforn	nation cor	cerning this matter, please ca	all:	
Chyristo	pher Ma	rtinez De	castro	305 370-8160 at ()	me Telephone Number
		Name of I	Person	Area Code Dayti	me Telephone Number
Enclosed	l is a che	ck for the	following amount:		
\$25.0	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:

TO:

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

FILED

2015 NOV 12 PM 1: 24

JJC Global Trading, LLC

SECHETARY OF STATE TALLAHASSEE, FLORIDA

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liability Co Florida document number L15000026567	ompany were filed on <u>02/12/2015</u>	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limit	ed liability company here:	
The new name must be distinguishable and contain the words "Limit	ed 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 ADDRI	ESS)	
Enter new mailing address, if applicable:		
(Mailing address MAY BE A POST OFFICE BOX)		
B. If amending the registered agent and/or registered agent and/or the new registered office address.		ecords, <u>enter the name of the new</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street	address
		, Florida
	City	, Florida
New Registered Agent's Signature, if changing Registered	Agent:	
I hereby accept the appointment as registered agent a	and agree to act in this capacity	y. I further agree to comply with the

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
AMBR	SIXTO OMAR	60 WEST 49TH STREET	
		HIALEAH FL. 33025	■ Remove
			Change
AMBR	JOSE M. RODRIGUEZ	60 WEST 49TH STREET	Add
		HIALEAH ,FL. 33025	□ Remove
			Change
			Add
			☐ Remove
			Change
			Remove
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			Remove
			□ Change

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Typed or printed name of signee

Filing Fee: \$25.00