USWAIII

(Re	questor's Name)	
(Ad	dress)	
(Ad	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
(Bu	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	_ Certificates	s of Status
Special Instructions to	Filing Officer:	





300278508713

11/02/15--01022--014 **25.00

FILED

SECRETARY OF STATE
VALLAHASSEE, FLORIGA

S. YOUNG

COVER LETTER

TO:

Registration Section
Division of Corporations

JOVIS Capital, LLC SUBJECT:	
Name of Limited Liability Company	
The enclosed Articles of Amendment and fee(s) are submitted for filing.	
Please return all correspondence concerning this matter to the following:	
Isbelia Duran	
Name of Person	
JOVIS Capital, LLC	
Firm/Company	
10484 SW 131st CT	
Address	SECTION 1
Miami, FL 33186	
City/State and Zip Code	1-2 PA
ibybrite@gmail.com	四年 建(
E-mail address: (to be used for future annual report notification)	Y OF STATE
For further information concerning this matter, please call:	DA SO
Isbelia Duran 786 547-7101 at ()	
Name of Person Area Code Daytime Telephone Number	
Enclosed is a check for the following amount:	. C
■ \$25.00 Filing Fee □ \$30.00 Filing Fee & □ \$55.00 Filing Fee & □ \$60.00 Filing Fee & □	of Status &
MAILING ADDRESS: STREET/COURIER ADDRESS:	
Registration Section Registration Section Division of Corporations Division of Corporations	
P.O. Box 6327 Clifton Building Tallahassee, FL 32314 2661 Executive Center Circle	

Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOVIS Capital, LLC		
(Name of the Lin	nited Liability Company as it now appears on our (A Florida Limited Liability Company)	records.)
the Articles of Organization for this Limited lorida document number L15000091469	Liability Company were filed on 05/26/201:	5 and assigned
his amendment is submitted to amend the fo	ollowing:	
If amending name, enter the new name	of the limited liability company here:	
he new name must be distinguishable and contain the	e words "Limited Liability Company," the designation	on "LLC" or the abbreviation "L.L.C."
nter new principal offices address, if app	licable:	
Principal office address MUST BE A STRI	EET ADDRESS)	SEC
		品百刀
		弱人已
nter new mailing address, if applicable:		SEE 2
Mailing address MAY BE A POST OFFIC	E BOX)	EST 2
		0827 5
. If amending the registered agent an egistered agent and/or the new registered	d/or registered office address on our r office address here:	records, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida stree	et 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>	Address	Type of Action
MGR	Jovanny Roque	10484 SW 131st CT	■ Add
		Miami, FL 33186	□ Remove
			□ Change
			Add
			□ Remove
			Change
		# 4.00 to 100 years 100 to	FILED Removed PRINCE STEEL Add
			Remove T
		Charige	
			Add
			Remove
		6	Change
			Add
			Remove
			□ Change
			□ Add
			Remove
			Change

	······						
				· · · · · · · · · · · · · · · · · · ·			
						·· <u> </u>	
							
	. .						
							
							
						· · · · · · · · · · · · · · · · · · ·	
							
					·		
_						ALL SEC	<u>n</u>
						<u> </u>	
						ASS. YSA	-2 LE
			A .			E C	圣日
fective	e date, if other that tive date is listed, the da	n the date of filin	ıg: ////////		(optic	onal) SI	
n effec ete: If	tive date is listed, the da the date inserted in t	te must be specific an his block does not	d cannot be prior to d meet the applicable	late of filing or more a statutory filing n	than 90 days after equirements, this	filing. Pursua date will no	nt £g-∳05.02 t b % listed :
cumer	nt's effective date on	the Department of	State's records.	, ,			
				**			
reco	rd specifies a del Oth day after the	ayed effective record is filed	date, but not a	n effective tim	ne, at 12:01 a	ı.m. on the	e earlier
The 9	•		_				
		30	2015				
	October						
	October		// // //	(h			

Page 3 of 3

Filing Fee: \$25.00