

## 95/54

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D. BRUCE NOV 02 2016

## **COVER LETTER**

Div	ision of Corpo	orations				
SUBJECT:	GLJ INVEST	MENT GROUP, LLC				
SUBJECT,		Name of Lim	ited Liability Company			
The enclosed	l Articles of A	mendment and fee(s) are sub-	nitted for filing.			
Please return	all correspond	lence concerning this matter	to the following:			
			ANDRES MONROY			
			Name of Person			
MONROY & CO PA						
Firm/Company						
		13	831 SW 59TH STREET SUITE 101			
			Address			
		M	IIAMI, FL 33183			
			City/State and Zip Code			
		F-mail address: ()	info@monroycopa.com o be used for future annual report notific	ration)	TAC SI	
For further in	nformation con	cerning this matter, please ca	·	,	ZÓIG NOV SECRETA	П
ANDRES M	IONROY		305 749-5555		ASSET -	F
	Name of P	Person	at () Area Code Daytime '	Telephone Number	F STA	LED
Enclosed is a	a check for the	following amount:			18 DA	
■ \$25.00 F	iling Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	e of Status &	

MAILING ADDRESS:

TO:

**Registration Section** 

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

	d Liability Compa A Florida Limited I	ny as it now appears on o Liability Company)	our records.)		
The Articles of Organization for this Limited Lie Florida document number L15000095154		, ,		and assigned	
This amendment is submitted to amend the follo  A. If amending name, enter the new name of	J	ility company here:			
The new name must be distinguishable and contain the wo		_	ation "LLC" or the abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:		16850 COLLINS AVE SUITE 112-246			
(Principal office address MUST BE A STREET ADDRESS)		SUNNY ISLES BEACH, FL 33160			
Enter new mailing address, if applicable:		16850 COLLINS AV	/E SUITE 112-246		
(Mailing address MAY BE A POST OFFICE I	<u>30X)</u>	SUNNY ISLES BEA	CH, FL 33160		
B. If amending the registered agent and/or the new registered off  Name of New Registered Agent:		<u>e</u> :	records, enter t	he name of the new	
New Registered Office Address:	13831 SW 59T	H ST SUITE 101		A P	
	MIAMI	Enter Florida st City	reet address, Florida	83 Tip Code	
New Registered Agent's Signature, if changing R	egistered Agent:	•	A	" <b>a</b>	
I hereby accept the appointment as registered provisions of all statutes relative to the prope accept the obligations of my position as regis being filed to merely reflect a change in the r company has been notified in writing of this c	er and complete stered agent as p egistered office	performance of my oprovided for in Chap	duties, and I am fa ter 605, F.S. Or, i,	miliar with and f this document is	

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K 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>	Name	<u>Address</u>	Type of Action
MGR	GEORGE JACOUB	525 E. JACKSON ST. APT. 702	
		ORLANDO, FL 32810	■ Remove
			□ Change
MGR	GLJ FAMILY TRUST	16850 COLLINS AVE	<b>=</b> Add
		SUITE 112-246	□ Remove
		SUNNY ISLES BEACH FL 33160	□ Change
			□ Remove
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ecord specifies a delayed enter the recor	d is filed.	t an effective time,	at 12:01 a.m. on the $\epsilon$	earlier
october 24	, 2016			
<u> </u>	gnature of a member or author			
Geome Jack	ν <u>υ</u>			

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Filing Fee: \$25.00