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(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Ci	ty/State/Zip/Phone	; #)
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(Bu	usiness Entity Nan	ne)
(Do	ocument Number)	
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AUG 04 2015 S. YOUNG

COVER LETTER**

	Registration Se Division of Cor			
SUBJEC	JFFJB LLC			
SUBSEC		Name of Lim	nited Liability Company	
		Amendment and fee(s) are sub	_	
		Allan Gottesman		
			Name of Person	 .
		JFFJB LLC		
			Firm/Company	-102 2
		8211 W Broward Blvd Sui	ite 440	三
			Address	- E S T T T T T T T T T T T T T T T T T T
		Plantation Florida 33324		
		• "	City/State and Zip Code	
		allan@gbc1040.com	to be used for future annual report	
D 4 4			•	ionication)
For furth	er information co	oncerning this matter, please c	all:	
Allan Go	ottesman		954 321-9991 at ()	
	Name of	f Person		time Telephone Number
Enclosed	is a check for th	ne 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)

TO:

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

JELIB LLC		
(<u>Name of the Limited Liability C</u> (A Florida Lir	Company as it now appears on our rec nited Liability Company)	ords.)
he Articles of Organization for this Limited Liability Comforida document number L15000127580	pany were filed on 7/27/2015	and assigned
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited	l liability company here:	
e new name must be distinguishable and contain the words "Limited	Liability Company," the designation "I	LC" or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
rincipal office address MUST BE A STREET ADDRES	<u></u>	
		30 5
nter new mailing address, if applicable:		詩 喜 五
failing address MAY BE A POST OFFICE BOX)		ω, ω π
manng mantas MATI BEATTON OF THE BOX		
. If amending the registered agent and/or registere gistered agent and/or the new registered office address		rds, enter the name of the
Name of New Registered Agent:		
New Registered Office Address:	·····	
	Enter Florida street add	iress
		Florida
	City	Zip Code

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

TECID LIC

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	Stephen Neustein	124 Gilda Ave	
		Pittsburgh PA 15217	☐ Remove
			☐ Change
			Add
			□ Remove
			☐ Change
			□ Add
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ective date, if other than the	ne date of filing: ust be specific and cannot be prior to	J	(optional)	
te: If the date inserted in this	block does not meet the applicable	le statutory filing requi	rements, this date will not	t be listed as
cument's effective date on the	Department of State's records.			
record specifies a delay	ed effective date, but not a	an effective time.	at 12:01 a.m. on the	可 earlier of
The 90th day after the re	cord is filed.	•		ידו כ
, July 30	2015			E U
ted Tury 30	ill S	11		Minus yel management manage
	Signature of a member or authoris	zed representative of a me	ember	
	Signature of a member of authoriz			

Page 3 of 3

Filing Fee: \$25.00