## L15000134621

(Re	questor's Name)	
<b>→</b> (Ad	dress)	<u> </u>
 (Ad	dress)	
(Cit	y/State/Zip/Phon	e#)
PICK-UP	☐ WAIT	MAIL.
(Bu	siness Entity Na	me)
(Do	cument Number	)
Certified Copies	_ Certificate	s of Status
Special Instructions to	Filing Officer:	





000277887850

10/09/15--01020--009 \*\*50.00

2015 OCT -9 PH 4: OX

J. HARRIS

## **COVER LETTER**

Div	ision of Corp	orations					
SUBJECT:	SHIMURA I	HALEAH LLC					
Name of Limited Liability Company							
The enclosed	l Articles of A	mendment and fee(s) are sub-	nitted for filing.				
Please return	all correspon	dence concerning this matter t	to the following:				
-		LUIS R. SMITH					
Name of Person							
JESSEL INVESTMENTS LLC							
Firm/Company							
11402 NW 41ST STREET SUITE 211							
			Address				
		DORAL, FL 33178					
			City/State and Zip Code	<del></del>			
LM.JESSEL@GMAIL.COM							
		E-mail address: (t	to be used for future annual report notific	cation)			
For further is	nformation co	ncerning this matter, please ca	all:				
LUIS R. SMITH			305 4702429 at ( )				
	Name of	Person	Area Code Daytime	Telephone Number			
Enclosed is	a check for the	e following amount:					
■ \$25.00 F	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:

**Registration Section** 

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

( <u>Name of the Limited Liah</u> (A Flor	ility Company ida Limited Lia	as it now appears on our record bility Company)	l <u>s.</u> )			
ne Articles of Organization for this Limited Liability orida document number L15000134621	Company w	rere filed on 08/06/2015	an	and assigned		
is amendment is submitted to amend the following:						
If amending name, enter the new name of the li	mited liabili	ty company here:				
e new name must be distinguishable and contain the words "L	imited Liability	Company," the designation "LLC	or the abbreviati	on "L.L.C."		
nter new principal offices address, if applicable:		5148 NW 116TH CT	$\Sigma_{\omega}$	201		
rincipal office address MUST BE A STREET AD	DRESS)	DORAL, FL 33178	100 100 100 100 100 100 100 100 100 100			
nter new mailing address, if applicable:		5148 NW 116TH CT	73.33.55.55.55.55.55.55.55.55.55.55.55.55	9 PH		
Mailing address MAY BE A POST OFFICE BOX)		DORAL, FL 33178	97. 97.	:. C &		
If amending the registered agent and/or registered agent and/or the new registered office as Name of New Registered Agent:		ce address on our record	s, <u>enter the n</u>	ame of the		
Non-Paristand Office Address 514	8 NW 116TH	СТ				
New Registered Office Address: 314	<del></del>	Enter Florida street addres	SS			
DO	RAL	Fi	orida <u>33178</u>			
<del></del>		Citv , 1 1		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
AMBR	MARCOS H. SHIMURA	5148 NW 116TH CT	■ Add
		DORAL, FL 33178	Remove
•			Change
AMBR	KEI SHIMURA	5148 NW 116CT TH	Add
		DORAL FL, 33178	■ Remove
			☐ Change
AMBR	KEI SHIMURA	5148 NW 116TH CT	🗏 Add
		DORAL, FL 33178	Remove
	,		☐ Change
			Add
			☐ Remove
			Add France    Add France   Add France   Add   Ad
			☐ Remove
			□ Chapure

	1					<del></del>			
				<del></del>					
					-				
<del></del>		<del></del>	<del>-</del>		<u> </u>	<del></del>			
			· <b>—</b>	<u></u>					
	<del>-</del>				<u></u> <u>.</u>		<del></del>		
_								<del>_</del>	
							<u> </u>		
				<del></del>				<del></del>	
								_	
				\ <u></u>					
ective dat	te, if other than t	he date of f	iling:			(opti	onal)		
effective d	te, if other than t	must be specifi	c and cannot be	prior to date of fi	ling or more the	n 90 days after	filing.) Pursuar	ıt to 605.	.020
te: If the comment's ef	date inserted in this ffective date on the	i block does i Denartment	not meet the ap	oplicable statut ords	ory filing requ	arements, this	s date will not	be liste	d as
		, Dopartinoite	or plate a rec	J1 G5.					
		and securi							
record s he 90th	pecifies a delay day after the r	ecord is fil	ve date, bui led.	t not an erre	ective time,	at 12:01 a	a.m. on the	earlie	≗r o
ed Octobe	er , 7		2015						
.cu		-/-	='	<u> </u>					
/			Z.S				\$ 60	<u>~</u> 3	
<u>`</u>		Signature	of a member or	authorized repre	sentative of a n	nember		20 115	Co.c.
				·			<b>独</b> 监	007	oranni.
	ei Shimura						15S	77	garan garan
Ke									
Ke			Typed or	printed name of	signee		(7) (7).		Sandari Sandari
Ke			Typed or	printed name of	signee		ma. Eu		Taraya E
Ke —				printed name of Page 3 of 3	signee			PN 4: 08	in the same