ofida Department of State Division of Corporations Electronic Filing Cover Sheet

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To:

Division of Corporations

Fax Number

: (850)617-6383

From:

: JP GLOBAL BUSINESS Account Name

Account Number : I20130000083 Phone

: (305)436-0093

Fax Number

: (305)436-0094

Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.

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Corporate Filing Menu

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12:37 PDT

TO:18506176383 FROM:7862171243 Page: (H160002601603)

COVER LETTER

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		Amendment and fee(s) are sub	_		
Please ret	turn all correspo	ondence concerning this matter	to the following:		
		JOSE PEREZ			
			Name of Person		
		JP GLOBAL BUSINESS	SOLUTIONS INC		
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			City/State and Zip Code	***************************************	<u> </u>
		MASTER@JPGBUSINES		- -	$\dot{\overline{\overline{z}}}$
			to be used for future annual report notifi	cation)	: ??
For furthe	er information c	concerning this matter, please c	all:		
PATRIC	K FINDARO		305 359-3700 at ()		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed	is a check for th	he following amount:			
\$25.0	O 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 eaclosed)	
	MAIL	ING ADDRESS:	STREET/COURIE	ER ADDRESS:	

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle Tallahassee, FL 32301

(HIBMA ZGAIBAR)

10/20/2016

12:37 PDT

TO:18506176383 FROM:7862171243

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION



VISA FRANCHISE LLC (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 Company were filed on 10/14/2015 and assigned Florida document number L15000175150 This amendment is submitted to amend the following: A. If amending name, enter the new name of the limited liability company here: The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC." 2625 Collins Ave #808 Enter new principal offices address, if applicable: Miami Beach FL 33140 (Principal office address MUST BE A STREET ADDRESS) 2625 Collins Ave. #808 Enter new mailing address, if applicable: Miami Beach Fl 33140 (Mailing address MAY BE A POST OFFICE BOX) B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address: Enter Florida street address

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

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, Florida

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E. Effective date, if other than the confictive date is listed, the date must Note: If the date inserted in this block document's effective date on the De	be specific and ck does not m	cannot be prior seet the applica	to date of filing or able statutory fil	more than 90 di ing requireme	(optional) ys after filing.) Ponts, this date will	orsuant to 605.020 Il not be listed as
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