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## **COVER LETTER**

TO: Registration Section Division of Corporations	
SUBJECT:	Crunny Jiu Jitsu LIC
	Name of Limited Diability Company
The enclosed Articles of Amendme	nt and fee(s) are submitted for filing.
Please return all correspondence co	ncerning this matter to the following:
	Julio CHang Name of Person  Firm/Company
	Name of Person
	Erunny Jiu Jitsu UC
	11
	3340 SW 3 87
	1.00.000
	City/State and Zip Code THE NICKEL STORE @ Email. Com
-	City/State and Zip Code
	HENICKEL STOKE @ EMBIL. COM
	E-mail address: (to be used for future annual report notification)
For further information concerning	
Julio	CH2n 9 at 305, 775-4798  Area Code Daytime Telephone Number
Name of Person	Area Code Daytime Telephone Number
Enclosed is a check for the followi	ng amount:
<b>10</b> \$25.00 Filing Fee □ \$30 Ce	00 Filing Fee &   \$55.00 Filing Fee &   \$60.00 Filing Fee, ritificate of Status   Certified Copy   Certificate of Status & Certified Copy   Certified Copy (additional copy is enclosed)
MAILING ADE	1
Registration Sect Division of Corp	
P.O. Box 6327	Clifton Building
Tallahassee, FL 1	2314 2661 Executive Center Circle Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

(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 12/14/2015 and assigned  Florida document number 15000207556  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:
(Name of the Limited Liability Gompany as it now appears on our records.)  (A Florida Limited Liability Company)  The Articles of Organization for this Limited Liability Company were filed on 12/14/2015 and assigned Florida document number 15000207-556  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:
The Articles of Organization for this Limited Liability Company were filed on 12/14/2015 and assigned Florida document number 15000207556  This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:
This amendment is submitted to amend the following:  A. If amending name, enter the new name of the limited liability company here:
A. If amending name, enter the new name of the limited liability company here:
THE NICKEL STORE LLC
The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:
(Principal office address MUST BE A STREET ADDRESS)
Faton new mailing address if anniaghla.
Enter new mailing address, if applicable:
(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:
Thank of the Register and The Register a
New Registered Office Address:
Enter Florida street address
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

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

MGR = Manager AMBR = Authorized Member Title Name **Address Type of Action** AMBR SUSANA MARTI-PEREZ 7841 NW 163 ST DAD MIAMI LAKES FL 33016 Remove (305) 812-1124 ☐ Add ☐ Remove \_□ Change □ Add □ Remove \_□ Change \_□ Add □ Remove \_ Change \_□ Add ☐ Remove \_□ Change □ Add ☐ Remove \_□ Change

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added

or removed from our records:

). If ame	ending any other info	rmation, enter change(s) here: (Attach additional sheets, if necessary.)	
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the red )) The	ord specifies a del 90th day after the	eyed effective date, but not an effective time, at 12:01 a.m. on the expression is filed.	earlier of
Dated	- 12/11/ 	Signature of a member of authorized representative of a member	_
		Typed or printed name of signee	_

Page 3 of 3

Filing Fee: \$25.00