

L16000046400

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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(Business Entity Name)

(Document Number)

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TALLAHASSEE, FLORIDA

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COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: INVERSIONES JJ 5563 LLC
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN EDUARDO MENESES
Name of Person
INVERSIONES JJ 5563 LLC
Firm/Company
2425 SW 27TH Ave, PH # 1406
Address
MIAMI, FLORIDA 33145
City/State and Zip Code
thousandtwo@aol.com
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

JUAN EDUARDO MENESES at (786) 571 9664
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,
Certificate of Status &
Certified Copy
(additional copy is enclosed) |
|--|--|--|--|

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**

INVERSIONES JJ 5563 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 03/07/16 and assigned Florida document number L16000046400

This amendment is submitted to amend the following:

A. If amending name, enter the new name of the limited liability company here:

none

The new name must be distinguishable and contain the words "Limited Liability Company," the designation "LLC" or the abbreviation "LLC."

Enter new principal offices address, if applicable:

none

(Principal office address MUST BE A STREET ADDRESS)

Enter new mailing address, if applicable:

none

(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:

none

New Registered Office Address:

none

Enter Florida street address

Florida

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 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.

none
If Changing Registered Agent, Signature of New Registered Agent

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TALLAHASSEE
FLORIDA

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>	<u>Type of Action</u>
	JUAN EDUARDO MENESES	2425 SW 27 th Ave #1406 Miami, FL 33125	<input type="checkbox"/> Add <input type="checkbox"/> Remove <input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change
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			<input type="checkbox"/> Add <input type="checkbox"/> Remove <input type="checkbox"/> Change

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TALLAHASSEE, FLORIDA

D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

none

E. Effective date, if other than the date of filing: 03/10/2016 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

Note: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
(b) The 90th day after the record is filed.

Dated

March, 10 2016

Signature of a member or authorized representative of a member

Juan Eduardo Meneses

Typed or printed name of signee

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CLERK OF STATE
TALLAHASSEE, FLORIDA

To: Florida Dept. of State
Division of Corporations

From: Juan Eduardo Meneses of
"Inversiones JJ 5563 LLC"

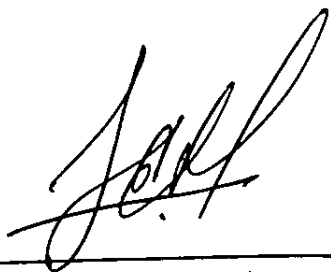
Return to: Juan Eduardo Meneses
2425 SW 27TH Ave, PH 1406
Miami, FL 33125.

Subject: Inversiones JJ 5563 LLC (Amend of Manager's name).

COVER LETTER

Please amend the name of Eduardo Meneses who is already filed as a manager of "Inversiones JJ 5563 LLC". His correct full name is: JUAN EDUARDO MENESES. Corporation was filed on 03/07/2016, and its effective date is 03/10/2016.

Sincerely;



Juan Eduardo Meneses
Manager of "Inversiones
5563 LLC"

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FLORIDA
DEPT. OF STATE
CORPORATIONS

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Miami, 03/10/2016