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MAY 17

COVER LETTER

TO:	Registration Sec Division of Corp				
SUBJE	JBRE Proper				
SUBJE	CT:		ted Liability Company		
		mendment and fee(s) are sub-	•		
		Desi R. Kellermann, Esq.			
			Name of Person	· -	
		Kellermann Varela PL			
			Firm/Company		
		605 Lincoln Rd., Ste. 400			
			Address		
		Miami Beach, FL 33139			
			City/State and Zip Code		
		bsiadat@aol.com	to be used for future annual rep	ort notification)	
For furt	her information co	ncerning this matter, please ca		or nonnearon,	
Desi R.	. Kellermann, Esq.		305 672 3	134	
	Name of	Person	Area Code	Daytime Telephone Number	_
Enclose	ed is a check for the	e following amount:			
\$25	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclose	Sed) \$60.00 Filing Certificate o Certified Co (additional copy	f Status & py

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

2016 MAY 16 PM 1:08

TALLAHASSEE, FLORIOL

JBRE Properties 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 Florida document number <u>L16000062079</u>	were filed on March 28, 2016	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	6799 Collins Ave., S504	
(Principal office address MUST BE A STREET ADDRESS)	Miami Beach, FL 33141	
Enter new mailing address, if applicable:	6799 Collins Ave., S504	
(Mailing address MAY BE A POST OFFICE BOX)	Miami Beach, FL 33141	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address here		nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	_
	, Florid	aZip 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

or removed from our records: MGR = Manager AMBR = Authorized Member			Address Add		
<u>Title</u>	<u>Name</u>	Address	FALL AHASSE STATE	Type of Ac	
			FLORIDA		
				Remove	
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	The address of the Manager, Barry B. Siadat, is hereby changed to 1455 Ocean Dr., BH-5, Miami Beach, FL 33139
	To the state of th
	The Man
	The same of the sa
	ctive date, if other than the date of filing: (optional) 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 605.020
<u>Note</u> docu	e: If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as ament's effective date on the Department of State's records.
If the root (b)	record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier on the 90th day after the record is filed.
Data	ed May 11 , 2016 .
Dale	
	To Salar

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00