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COVER LETTER

	gistration Sec vision of Corp			
SUBJECT:		Jessica Associates LLC		
SUBJECT		Name of Limi	ted Liability Company	
The enclose	d Articles of A	mendment and fee(s) are subr	nitted for filing.	
Please return	n all correspon	dence concerning this matter t	to the following:	
		Attn: J. Scharfman		
			Name of Person	
		IRA Financial Group	·	
			Firm/Company	
		1688 Meridian Avenue, Su	ite 504	
			Address	
		Miami Beach, FL 33139		
			City/State and Zip Code	
		JackD2368@gmail.com		
		E-mail address: (t	o be used for future annual report not	ification)
For further	information co	ncerning this matter, please ca	ill:	
Jean Schar	finan		305 5389297 at ()	
	Name of	Person	Area Code Daytin	ne Telephone Number
Enclosed is	a check for the	e following amount:		
\$25.00	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)

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

Edward and Jessica Associates LLC		
(<u>Name of the Limited Liability Co</u> (A Florida Lim	mpany as it now appears on our records.) ited Liability Company)	
The Articles of Organization for this Limited Liability Comp	pany were filed on May 11, 2016	and assigned
Florida document number L 1600 009 2836		
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 I	Liability Company," the designation "LLC" or t	he abbreviation "L.L.C."
Enter new principal offices address, if applicable:		······································
(Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		
		S 💯
Enter new mailing address, if applicable:		<u> </u>
(Mailing address MAY BE A POST OFFICE BOX)		# G.25
		3 8 9 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0
		3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3. 3
B. If amending the registered agent and/or registere registered agent and/or the new registered office address		iter the name of the ne
Name of New Registered Agent:		. ,
New Registered Office Address:		·
	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.

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

Title	Name	Address	Type of Action
MGR'	JENNIFER DIOP	62 Stedman St Chelmsford MA 018	
			■ Remove
			Change
MGR	JENNIFER DIEP	62 Stedman St Chelmsford MA 018	■ Add
			Remove
		··· ·	Change
			Remove
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Note: I docume	e date, if other than the date of filing: dive date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing of the date inserted in this block does not meet the applicable statutory filing requirements, this date not's effective date on the Department of State's records. Ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. 80th day after the record is filed.	e will not be listed a
Detai (October 18 2016	
Dated _	· ·	
	Signature of a member or authorized representative of a member	16 OCT

Filing Fee: \$25.00