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COVER LETTER

TO: Registration Section Division of Corporations
SUBJECT: <u>Jq Donal Properties</u> <u>LC</u> 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:
Jesus A. Quintero Yamin
J9 Jonal Properties UC Firm/Company
1300 Brickell Day Dr. Ste 500 Address
City/State and Zip Code anilaeva a ja prucup. com E-mail address: (to be used for future annual report notification)
E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Anna Milaeva at 305 606 5202 Name of Person Area Code Daytime Telephone Number
Enclosed is a check for the following amount:
\$25.00 Filing Fee Certificate of Status \$25.00 Filing Fee & Certificate of Status \$25.00 Filing Fee & Certificate of Status \$25.00 Filing Fee & Certificate of Status & Certified Copy (additional copy is enclosed) \$25.00 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

Jg Don	al P	no p	2en+	ies	LL		
Name of the Limited	d Liability Compan A Florida Limited L	y as it nov lability Co	v appears on mpany)	our records	<u>.</u>)		
The Articles of Organization for this Limited Lia Florida document number <u>L 16000</u>			l on <u>0.6</u>	/22/2	2016	and assig	ned
This amendment is submitted to amend the follow	wing:						
A. If amending name, enter the new name of	the limited liabil	lity comp	oany here:				
The new name must be distinguishable and contain the wo	rds "Limited Liabili	ty Compan	y," the design	nation "LLC"			C."
Enter new principal offices address, if applica	ble:	sai	me_	as	be fun	<u> </u>	
(Principal office address MUST BE A STREET	ADDRESS)						
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE B B. If amending the registered agent and/oregistered agent and/oregistered agent and/oregistered agent and/oregistered agent.	r registered off	ice addr	me ress on ou	as r records,	he for		the new
Name of New Registered Agent:	same	as	les	one	TALL!	<u>SF</u>	
New Registered Office Address:		City	nter Florida s		rida Tr	DEC 27 Adde	The state of the s
New Registered Agent's Signature, if changing Re	gistered Agent:	O.I.,			SIA		7
I hereby accept the appointment as registered provisions of all statutes relative to the proper accept the obligations of my position as regist being filed to merely reflect a change in the recompany has been notified in writing of this ci	r and complete p ered agent as pr egistered office a	erforma rovided f	nce of my for in Chap	duties, and oter 605, F	d I am famil S.S. Or, if th	liar with a is docum	and ent is

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 Jq Real Estate 1300 Brickell Bay In. X Add

LCC Ste. 500 Rem □ Remove Miami, Florida 33/36 Change MGR Jq Rental 1300 Brickell Bay Add Hultifamily LC Dr., Ste 500 Remove Miami, F/ 33131 _ Change MGR Jesus A. 1300 Brickell Boey Add

Greinteno Dr. Ste 500 Remove Miceni, Fl. 33131 □ Add ☐ Remove Change □ Add □ Remove ☐ Change □ Add □ Remove Change

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effective date is lis	ted, the date must be erted in this block	specific and	cannot be pri	or to date of fill	ng or more the	n 90 days after	filing.) Pursua	ant to 605.0
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record specific he 90th day a	es a delayed ef ifter the record	fective d	ate, but r	not an effec	tive time,	at 12:01 a	.m. on th	e earlier
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Filing Fee: \$25.00