## L1100204747



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## **COYER LETTER**

TO: Registration Se Division of Cor				
SUBJECT:	JPL & B Red Name of Lim	ited Liability Company	<del></del>	
	Amendment and fee(s) are sub	J		
Please return all correspon	ndence concerning this matter	to the following:		
	Jian pine	2 Liu Name of Person		
	JPL 168 * E	3 Investment Firm/Company	LLC	
	520 1	Mento Lane Address		SECRET
	Naples.	, FL 3411Z		NSSET NSSET
	Jenny 9	City/State and Zip Code  5816 @ gmail, Code be used for future annual report notifications.	ication)	PH 2: 14
For further information co	ncerning this matter, please ca	all:		
Jian Pi	ng Liu Person	at ( <u>626)</u> <u>863</u> - Area Code Daytime	835-1 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

(Name of the Limited Liability Com (A Florida Limite	Realty LLC  pany as it now appears on our records.) d Liability Company)	
The Articles of Organization for this Limited Liability Compar Florida document number 16000204747.	ny were filed on 117/16	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited lia	ability company here:	
JP168 & B Invest	ment LLC	
The new name must be distinguishable and contain the words "Limited Lia	bility Company," the designation "LLC" or the abb	reviation "L.L.C."
Enter new principal offices address, if applicable:		<del> </del>
(Principal office address MUST BE A STREET ADDRESS)		3 20
		0 77
Enter new mailing address, if applicable:		3
(Mailing address MAY BE A POST OFFICE BOX)		22 P
		- 50
B. If amending the registered agent and/or registered registered agent and/or the new registered office address he		he name of the new
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	
	Flant J.	
-	, Florida	Zip Code
Naw Bagistared Agent's Signature if shanging Begistered Agen	4.	

## 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 <u>Title</u> **Address Type of Action** <u>Name</u> \_□ Add \_□ Remove ☐ Change \_ Add □ Remove □ Change ☐ Change \_ Add ☐ Remove ☐ Change □ Add □ Remove ☐ Change \_□ Add ☐ Remove \_□ Change

· ii amending unj	y other information, enter change(s) here: (Attach additional sheets, i,	r necessury.)
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(If an effective date is line Note: If the date in	other than the date of filing:  listed, the date must be specific and cannot be prior to date of filing or more than 90 days inserted in this block does not meet the applicable statutory filing requirements ive date on the Department of State's records.	optional) s after filing.) Pursuant to 605.0207 (3)(b s, this date will not be listed as the
the record specif ) The 90th day	ifies a delayed effective date, but not an effective time, at 12: after the record is filed.	01 a.m. on the earlier of:
Dated 11 / 18	8/2016	
	Signature of a member or authorized representative of a member	
	Jian Pius Liu Typed or printed name of signee	

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Filing Fee: \$25.00