L16000207642

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,
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COVER LETTER

TO:	Registration Se Division of Cor			*	
SUBJE	JSKBTK L	LC			
30 BJE	Name of Limited Liability Company				
The end	closed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please r	eturn all correspo	ondence concerning this matter	to the following:		
		JUDITH KATZEN			
			Name of Person		
		JSKBTK LLC			
			Firm/Company		
		1125 SAN PEDRO AVEN	ıue .		
			Address	<u> </u>	
		CORAL GABLES FL 33	156		
			City/State and Zip Code		
		JUDIK614@AOL.COM		V	
		E-mail address: (to be used for future annual report notifi	cation)	
For furt	her information o	oncerning this matter, please c	all:		
JUDIT	H KATZEN		at (305) 7729 Area Code Daytime	670	
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclose	d is a check for the	ne 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 Taliahassee, 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

JSKBTK _j LLC		
(Name of the Limited Liability Compa (A Florida Limited L	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	were filed on 11/11/2016	and assigned
lorida document number L16000207642		
his amendment is submitted to amend the following:		
. If amending name, enter the new name of the limited liab	llity company here:	
he new name must be distinguishable and contain the words "Limited Liabil	ity Company," the designation "LLC" or	the abbreviation "L.L.C."
nter new principal offices address, if applicable:		22
Principal office address MUST BE A STREET ADDRESS)		2019 APR
		25
nter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)	· · · · · · · · · · · · · · · · · · ·	<u> </u>
		<u> </u>
3. If amending the registered agent and/or registered of egistered agent and/or the new registered office address here	· —	nter the name of the new
Name of New Registered Agent:		
New Registered Office Address:	E. d. El. i. J. day and J.J.	
	Enter Florida street address	
	, Florid	
	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

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	BARRY KATZEN	1125 SAN PEDRO AVENUE CORAL GABLES FL 33156	■ Add
			□ Remove
			☐ Change
			D Add
			□ Remove
			Change
			Add
			□ Remove
			☐ Change
	······		
			□ Remove
			Change
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	04/11/2019
an effi lote:	ve date, if other than the date of filing:
e rec The	ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of 90th day after the record is filed.
ated.	april 12, 2019.
	(land to Della)

Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00