416000211710

(Re	questor's Name)	
(Ad	dress)	
(Ad	dress)	
(Cit	y/State/Zip/Phone	#)
PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Nam	e)
(Do	cument Number)	
Certified Copies	_ Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only

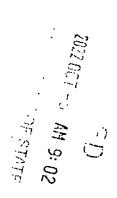
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COVER LETTER

TO: Registration Se Division of Cor			
JAGGER C	NE THIRTY LLC		
SUBJECT:			
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	PAZ, IGNACIO		
		Name of Person	
	JAGGER ONE THIRTY L	LC	
	· · · · · · · · · · · · · · · · · · ·	Firm/Company	
	1895 SW 2ND AVE MIAN	41, FL 33129	
		Address	
	Miami, FL (33129)		
	ignaciopaz305@gmail.com	City/State and Zip Code	
	E-mail address: (to be used for future annual report not	fication)
For further information o	oncerning this matter, please c	all:	
Paz, Ignacio		305 910.9404	
	C.D.	at ()	T I I XI X
Name o	f Person	Area Code Daytim	e Telephone Number
Enclosed is a check for the	he 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 Addres		Street Address:	
Registration S Division of C		Registration Se Division of Cor	
P.O. Box 632	•	The Centre of T	
Tallahassee, I			e Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JAGGER ONE THIRTY LLC				
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our re- nability Company)	cords.)		
The Articles of Organization for this Limited Liability Company Florida document number 1.16000211710	were filed on		and assigne	d
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 abb	reviation "L.L.C."	
Enter new principal offices address, if applicable:				
(Principal office address MUST BE A STREET ADDRESS)				
Data and a cities address of applicables				
Enter new mailing address, if applicable:		·		
(Mailing address MAY BE A POST OFFICE BOX)				
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent:	address on our records, <u>er</u>	nter the name	e of the new res	gistere
New Registered Office Address:			 : : .	
	Enter Florida street aa	aaress	, <u>;</u>	
		, Florida	70 Tra	
	City		Zip Code	
New Registered Agent's Signature, if changing Registered Agent:				
I hereby accept the appointment as registered agent and agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my dutie provided for in Chapter 6	s, ana 1 am j 605, F.S. Or,	amiliar with at if this docume	u

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>	Name	<u>Address</u>	Type of Action
AMBR	Castro, Nadia	1895 SW 2nd Ave	
			□Add
		Miami, FL 33129	
			■Remove
			□Remove
			☐ Change
		· :	□Add
			□Remove
			□Change
			□ Remove
			☐ Change
			□Add
			□Remove
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an eff	ive date, if other than the date of filing:
recor Lis ti	rd specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th day after the led.
ated	September 28, 2022.
	Signature of a miember or authorized representative of a member