## 46000218823

(Re	equestor's Name)	
(Ad	ldress)	
(Ac	ldress)	
(Cit	ty/State/Zip/Phone	e #)
PICK-UP	☐ WAIT	MAIL
	ısiness Entity Nar	ne)
(Do	ocument Number)	
Certified Copies	Certificates	of Status
Special Instructions to	Filing Officer:	

Office Use Only



900322345119

12/27/18--31335--003 \*\*60.60

JAN 0 9 2019 S. YOUNG 18 DEC 27 PM 6: 2 SECRETANY OF STATE TALLAMASSEE FLORID

## **COVER LETTER**

	gistration Se vision of Cor			
· centeze	JAER CB L	LC		
SUBJECT	:	Name of Lim	ited Liability Company	
The enclose	ed Articles of .	Amendment and fee(s) are sub	mitted for filing.	
Please retur	n all correspo	ndence concerning this matter	to the following:	
		DESIREE VIRGINIA CA	CERES BERMUDEZ	
			Name of Person	
		MGR/JAER CB LLC		
			Firm/Company	
		769 TIMBERWOOD CIR	CLE EAST	
		<del></del>	Address	<del></del>
		TALLAHASSEE/FLORII	DA 32304	
			City/State and Zip Code	
		jc045827@gmail.com		
			to be used for future annual report notification	<del>===== C</del>
For further	information co	oncerning this matter, please ca	all:	LE 27 SSEE,
DESIREE	CACERES		850 3455401 at()	
	Name of	Person	Area Code Daytime Telep	hone Number 0 6: 25
Enclosed is	a check for th	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

JAER CB LLC		
(Name of the Limited Liability Co (A Florida Limi	mpany as it now appears on our records. ted Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Comp	any were filed on 12/02/2016	and assigned
lorida document number 1.16000218823		
his amendment is submitted to amend the following:		
If amending name, enter the new name of the limited	liability company here:	
he new name must be distinguishable and contain the words "Limited I	iability Company," the designation "LLC" of	or the abbreviation "L.L.C."
nter new principal offices address, if applicable:		
Principal office address MUST BE A STREET ADDRESS	<u> </u>	
		至28 6
		S S
nter new mailing address, if applicable:		EC.
Mailing address MAY BE A POST OFFICE BOX)		25. 7
		3 32 0
		<u> </u>
. If amending the registered agent and/or registered egistered agent and/or the new registered office address		enter thermame of the
	······································	
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		ida
	L'inv	Zin Corlo

## 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	Type of Action
MGR	DESIREE VIRGINIA CACERES BERMUDEZ	769 TIMBERWOOD CIRCLE EAST, TALLAHASSEE FL	<b>=</b> Add
			Remove
			Change
			□ Remove
			Change
	<del></del>	<del></del>	
			Remove
			Change
		☐ Remove	
		Change	
	<del></del>		
		□ Remove	
		Change	
<del></del>			
			Remove

	<u> </u>
_	
Note: If	date, if other than the date of filing:
	od specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the earlier of the day after the record is filed.
Dated	December. 22 2018
	Signature of a member or authorized representative of a member  Javier Caceres Dvinones  Typed or primed name of signed

Page 3 of 3

Filing Fee: \$25.00