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COVER LETTER

TO:	Registration Sec Division of Corp			
SUBJI	J & J Leasin	g LLC		
5 C 241	<u></u>	Name of Limi	ted Liability Company	
The en	closed Articles of a	Amendment and fee(s) are subr	nitted for filing.	
Please	return all correspon	ndence concerning this matter t	to the following:	
		Janet Marty-Navarro		Firm/Company Address //State and Zip Code sed for future annual report notification) 786 326-5179 _at (
			Name of Person	
			Firm/Company	
		14349 Commerce Way		
		Address		
		Miami Lakes, Fl 33016		
			City/State and Zip Code	-
		jnjleasing@gmail.com		
		E-mail address: (1	o be used for future annual report notifi-	cation)
For fur	ther information co	oncerning this matter, please ca	dl:	
Janet N				
	Name of	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
■ \$2	5.00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status		Certificate of Status &

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

J & J Leasing LLC		
(<u>Name of the Limited Liability</u> (A Florida Li	Company as it now appears on our records.) imited Liability Company)	
The Articles of Organization for this Limited Liability Con Florida document number L16000227102	npany were filed on 12/15/2016 .	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limite</u>	d liability company here:	
The new name must be distinguishable and contain the words "Limite		
The new name must be distinguishable and contain the words "Limite	d Liability Company," the designation "LLC" or	the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	N/4	1,1
(Principal office address MUST BE A STREET ADDRE	<u>SS)</u>	- 3 7 TI
		2 2 1
Enter new mailing address, if applicable:	NA	7 17
(Mailing address MAY BE A POST OFFICE BOX)		
		<u></u>
		nter the name of the new
Nam Baristand Office Addison	alor	
New Registered Office Address:	new mailing address, if applicable: If address MAY BE A POST OFFICE BOX) amending the registered agent and/or registered office address on our records, enter the name of the red agent and/or the new registered office address here:	
	, Florid	la
	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	Jesus R. Navarro	14060 NW 82nd Avenue	
		Miami Lakes, Fl 33016	□ Remove
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Effective date, if other than the d	ate of filing	:			(opt	ional)		
If an effective date is listed, the date must line Note: If the date inserted in this block	be specific and ok does not m	cannot be prior eet the applic	r to date of fi cable statute	ling or more t ory filing rea	nan 90 days afte juirements, th	er tiling.) I'ui iis date will	rsuant to 605.0 not be listed	207 (3) as the
document's effective date on the Dep	partment of St	ate's records	. .					
ne record specifies a delayed The 90th day after the reco	effective dans	ate, but no	ot an effe	ctive time	e, at 12:01	a.m. on	the earlier	of:
		2017						
Dated January 3	 ,	2017	<u> </u>		_	_		
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Page 3 of 3

Typed or printed name of signee

Filing Fee: \$25.00