117000065750

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SECRETARY OF STATE SECRETARY OF STATE ALLAHASSEE. FLORIDA

APR 19 2017 S. YOUNG

COVER LETTER

то:	Registration Sec Division of Corp				
SUBJE		ESTMENT, LLC			
SUBJE		Name of Lim	ited Liability Company		
		Amendment and fee(s) are sub	_		
riease	return an correspoi	IRA B. PRICE, ESQ.	to the following.		
			Name of Person		
		<u>., </u>	Firm/Company		
			Address	1 LC3	
		MIAMI, FLORIDA 33176		THE REAL PROPERTY.	Ç.
		IPRICE@LEGALTITLESE	City/State and Zip Code RVICES.COM	TAPR 18 PH 4: 28	
		E-mail address: (to be used for future annual report notif	ication)	7
For fur	ther information co	oncerning this matter, please ca	all:	28	إبيا
IRA PI			305 670 3030		
	Name of	Person	Area Code Daytime	Telephone Number	
Enclose	ed is a check for the	e following amount:			
\$2:	5.00 Fiting 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

JJBAB INVESTMENT LLC	
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears on our records.) nited Liability Company)
The Articles of Organization for this Limited Liability Comp Florida document number L17000065750	pany were filed on MARCH 22, 2017 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited	liability company here:
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LLC" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	
(Principal office address MUST BE A STREET ADDRES.	<u>s</u>
	TO THE THE TANK TO
Enter new mailing address, if applicable:	
(Mailing address MAY BE A POST OFFICE BOX)	2
B. If amending the registered agent and/or registered registered agent and/or the new registered office address	ed office address on our records, enter the name of the new
Name of New Registered Agent:	
New Registered Office Address:	Enter Florida street address
	, Florida
	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
AMBR	JONATHAN J. BARRIOS	533 E. LIBERTY STREET	□ Add
		LOUISVILLE, KENTUCKY	□ Remove
			■ Change
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ffective date, if other than the an effective date is listed, the date must ote: If the date inserted in this blocument's effective date on the De	be specific an ck does not	d cannot be primeet the app	ior to date of licable statu	filing or more story filing r	than 90 days	optional) after filing.) Pur this date will	suant to 605.0207 not be listed as
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