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D. SCOTT APR 2 6 2017

## **COVER LETTER**

Divi	ision of Cor	porations				
SUBJECT:	REJCZ LLO	C				
Name of Limited Liability Company						
The englaced	Articles of	Amendment and fee(s) are sub	mitted for filling			
Please return	all correspo	ndence concerning this matter	to the following:			
		Louis Barajas				
			Name of Person			
		Business Management LAB				
	Firm/Company					
		Tustin, CA 92782				
		louis@labarajas.com				
			to be used for future annual report	nottification)	-i,,	
For further in	formation co	oncerning this matter, please ca	all:		三百二	
Louis Baraja	s		562 347-007	5	第 2 7 1	
	Name of	Person		ytime Telephone Number	PILEU AR 24 MP	
Enclosed is a	check for th	e following amount:			5 <b>5</b>	
■ \$25.00 Fi	ifing Fee	□ \$30.00 Filing Fee & Certificate of Status	□ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	Certified (	ing Feer e of Status &	

MAILING ADDRESS:

то:

Registration Section

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

REJCZ LLC		
( <u>Name of the Limited Liability Compa</u> (A Florida Limited	iny as it now appears on our records.) Liability Company)	<del></del>
The Articles of Organization for this Limited Liability Company Florida document number $\frac{L17000080606}{L117000080606}$	were filed on April 10, 2017	and assigned
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 Liabi	lity Company," the designation "LLC" or the a	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	300 Sevilla Ave Suite 301	
(Principal office address MUST BE A STREET ADDRESS)	Coral Gables, FL 33134	
Enter new mailing address, if applicable:	300 Sevilla Ave Suite 301	
(Mailing address MAY BE A POST OFFICE BOX)	Coral Gables, FL 33134	
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her		题。 24
Name of New Registered Agent:		
New Registered Office Address:	Enter Florida street address	9 5 To
	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>	Name	Address	Type of Action
Manager Manged	Angelica Barajas	300 Sevilla Ave. Suite 301 Coral Gables, FL 331	34 <b>≡</b> Add
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ne record specifies a delay The 90th day after the re	ed effective cord is filed	date, but r j.	not an effec	tive time, a	t 12:01 a.n	n. on the ear	lier o
Dated April 17		2017					
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Filing Fee: \$25.00