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COT 1177 Y C JUL 127 READ NOTESWIS COVER LETTER

COVER LETTER
TO: Registration Section Division of Corporations
SUBJECT: JMC OF NORTH MIAMI LLC  Name of Limited Liability Company
The enclosed Articles of Amendment and fee(s) are submitted for filing.
Please return all correspondence concerning this matter to the following:
Please return all correspondence concerning this matter to the following:  Ax: 850 24560  Ax: 850 24560  Ax: 850 24560  Name of Person  Simmons Phone: 850-245  Same of Person  JMC OF NORTH MIAMI LLC
IMC OF NORTH MIAMI LLC Firm/Company
12420 NE 6TH AVENUE
NORTH MIAMI FL 33161 City/State and Zip Code
City/State and Zip Code  AUGUSTE MANUELA C GMII- (OM  E-mail address: (to be used for future annual report notification)
For further information concerning this matter, please call:
Mare of Person  Name of Person
Enclosed is a check for the following amount:
S25.00 Filing Fee \( \text{ \subset} \) \$30.00 Filing Fee \( \text{ \subset} \) \$55.00 Filing Fee \( \text{ \subset} \) \$60.00 Filing Fee.  Certificate of Status \(  Certificate of Status \( \text{ Certificate of Sta
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

I WANT TO Remove the address of AMBR

13075 NIW 13th Street under the title of AMBR

PEMBroke Pones, El 33028

PEMBroke Pones, El 33028

PONE 6TH ME NORTH MUAMIT, Fl. 33161

TO 12420 NE 6TH ME NORTH MUAMIT, Fl. 33161

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Name of the Limited Liability Company as it now appears on our records.)  (A Florida Limited Liability Company)
The Articles of Organization for this Limited Liability Company were filed on
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 ADDRESS)    12420 NE 67h Ave   3316
Enter new mailing address, if applicable:  (Mailing address MAY BE A POST OFFICE BOX)    Mailing address MAY BE A POST OFFICE BOX     Mailing address MAY BE A POST OFFICE BOX
B. If amending the registered agent and/or registered office address on our records, enter the name of the new registered agent and/or the new registered office address here:
Name of New Registered Agent:
New Registered Office Address: 12420 NE 6th AUCOME
NORTH MIAMI, Florida 33/6/

## 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

<u>Title</u>	Name	Address	Type of Action
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