

L17000152353

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

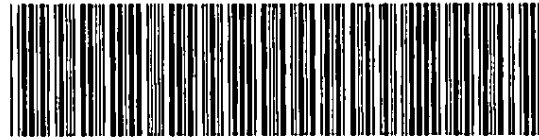
(Business Entity Name)

(Document Number)

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Clerk of Court

D SCOTT

AUG 28 2017

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** FLORIDA WARRIORS MARTIAL ARTS ACADEMY, 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:

Cheryl Julien Kaufman, Esq.

\_\_\_\_\_  
Name of Person

Cheryl Julien Kaufman, PA

\_\_\_\_\_  
Firm/Company

2340 S. Dixie Hwy.

\_\_\_\_\_  
Address

Miami, FL 33133

\_\_\_\_\_  
City/State and Zip Code

cheryl@kaufmantitle.com

\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

Cheryl Julien Kaufman, Esq.

305 854-0500  
at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
Name of Person

\_\_\_\_\_  
Area Code

\_\_\_\_\_  
Daytime Telephone Number

Enclosed is a check for the 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

17  
AUG 24 12:10:56  
FILED

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

FLORIDA WARRIORS MARTIAL ARTS ACADEMY, LLC

(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 July 17, 2017 and assigned  
Florida document number L17000152353.

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:**

18505 NW 75 Place #107-108

**(Principal office address MUST BE A STREET ADDRESS)**

Miami, FL 33015

**Enter new mailing address, if applicable:**

18505 NW 75 Place #107-108

**(Mailing address MAY BE A POST OFFICE BOX)**

Miami, FL 33015

**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:

Cheryl Julien Kaufman, Esq.

New Registered Office Address:

2340 S. Dixie Hwy.

*Enter Florida street address*

Miami

*City*

Florida

33133

*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>	<u>Address</u>	<u>Type of Action</u>
MGR	Ibrahim Morales Moreno	9619 Fountainebleau Blvd Apt 117	<input type="checkbox"/> Add
		The Suites, FL 33172	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
MGR	John F. Morales Jaramillo	1763 NE 182 Street	<input type="checkbox"/> Add
		North Miami Beach, FL 33126	<input type="checkbox"/> Remove
		*Change title from PRES to MGR	<input checked="" type="checkbox"/> Change
MGR	Ariana Testamarek	5811 SW 164 Terrace	<input type="checkbox"/> Add
		Southwest Ranches, FL 33331	<input type="checkbox"/> Remove
		*Change from VP to MGR	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Article III is hereby revised to add the following at the beginning thereof:

The purpose for which the limited liability company is organized is for:

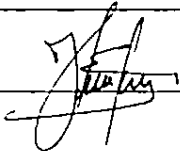
**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

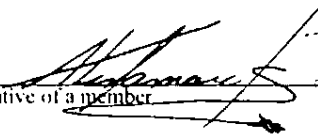
If the record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:  
(b) The 90th day after the record is filed.

Dated August 22 , 2017



John F. Morales Jaramillo

Signature of a member or authorized representative of a member



Ariana Testamarek

Typed or printed name of signee

FILED  
AUG 26 12:10:58  
MONTGOMERY