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To:

Division of Corporations

Fax Number

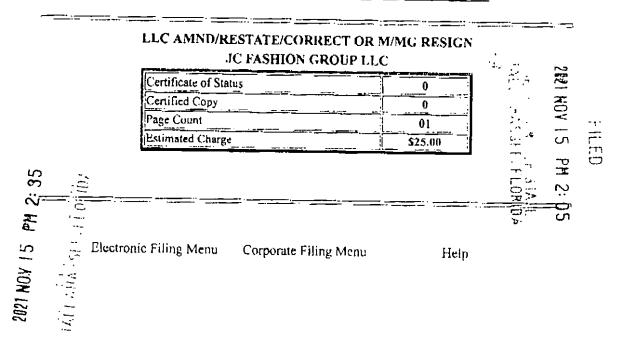
: (850)617-6383

From:

Account Namo : PFDRO LUZQUINOS Account Number : 120170000042 Phone : (954)655-8413 Fax Number : (954)432-8807

\*\*Enter the email address for this business entity to be used for future armual report mailings. Enter only one email address please.\*\*

EMAIL Address: PLUTQUINDIFR HOTMAIL COM



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## **COVER LETTER**

TO:	Registration S Division of Co	ection rporutions		
SUBJEC	JC FASIII	ON GROUP LLC		
		Name of Lin	nited Liability Compuny	
The encid	osed Articles of	Amendment and fee(s) are su	broited for Gline	
		ondence concerning this matter		
		GARCIA, LUIS		
			Name of Person  Firm/Company  Address  14  City/State and Zip Code  COM  be used for future annual report notification)  4  555.00 Filing Fee & S60.00 Filing Fee, Certified Copy (additional copy is enclosed)  Street Address:  Registration Section  Division of Corporations  The Centre of Tallahassee	
			Firm/Company	· · · · · · · · · · · · · · · · · · ·
		4451 SW 54TH ST APT	3	
			Address	
		FT LAUDERDALE, FL 3	33314	
			City/State and Zip Code	
		PLUZQUINOSF@HOTM.	AIL.COM	
		E-mail uddress:	to be used for future annual report no	Offication)
For furthe	r information co	oncerning this matter, please c	all:	
PEDRO I	LUZQUINOS			
	Name of	Person		me Telephone Number
Enclosed i	is a check for th	e following amount:		
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Registration Section Division of Corporations				
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1	allahassee, F	L 32314		ranalassee oe Street, Suite 810

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JC FASHION GROUP 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 07/25/2017 \_\_\_ and assigned Florida document number L17000158921 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) Enter new mailing address, if applicable: (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: GARCIA, JULIAN Name of New Registered Agent: 4451 SW 54TH ST APT 3 New Registered Office Address: Enter Florida street oddi ass FT LAUDERDALE 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
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		DACULA, GA 33019	
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