

L17000173148

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PLEASE NOTE THERE ARE TWO DIFFERENT
FILINGS IN THIS ONE ENVELOPE AS
FOLLOWS:

Articles of Amendment for Aileen & Jessica, LLC,
FDN: L17000173148

Articles of Amendment for Nestor & Sayonara, LLC,
FDN: L17000173151

Thank you again for your assistance in these matters ☺

LAW OFFICES
ALAN FRANCIS RUF
Admitted in Florida and New York

GALLERIA CORPORATE CENTRE - SUITE 506 - 2455 EAST SUNRISE BOULEVARD - FORT LAUDERDALE, FLORIDA 33304-3119

(954) 561-2230

FAX (954) 561-7489

Email: paralegal@alanrufllaw.com

February 5, 2018

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, Florida 32301

Via FedEx Only

Re: ***Articles of Amendment
Aileen & Jessica, LLC
FDN: L17000173148***

Dear Sir or Madam:

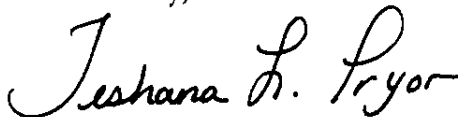
Please find enclosed the following Articles of Amendment to the Articles of Organization of AILEEN AND JESSICA, LLC. The changes are as follows:

1. The Principal and Mailing Address has been changed to: 11830 Kalmar Circle, North, Parkland Florida 33076
2. The Names of the Managers are: Nestor Galvez & Sayonara Galvez

Finally, please find enclosed a Check in the amount of Twenty-Five (\$25.00) Dollars representing the filing Fee.

Should you need anything further, please do not hesitate to contact this office and thank you.

Sincerely,



TESHANA L. PRYOR

Legal Assistant to Alan Francis Ruf, Esq.
Attorney at Law

Enclosures

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: AILEEN AND JESSICA, 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:

NESTOR GALVEZ

Name of Person

Firm/Company

11830 KALMAR CIRCLE NORTH

Address

PARKLAND, FLORIDA 33076

City/State and Zip Code

GALVEZN@ICLOUD.COM

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

For further information concerning this matter, please call:

NESTOR GALVEZ

954 790-5329
at ()
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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**

AILEEN AND JESSICA, 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 AUGUST 14, 2017 and assigned
Florida document number L17000173148.

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)

11830 KALMAR CIRCLE NORTH

PARKLAND, FLORIDA 33076

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

11830 KALMAR CIRCLE NORTH

PARKLAND, FLORIDA 33076

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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:

11830 KALMAR CIRCLE NORTH

Enter Florida street address

PARKLAND

City

, Florida 33076

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	NESTOR GALVEZ		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		11830 Kalmar Circle N., Parkland, FL 33076	<input checked="" type="checkbox"/> Change
MGR	SAYONARA GALVEZ		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
		11830 Kalmar Circle N., Parkland, FL 33076	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

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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.

Dated

Mester Selva
Signature of a member or authorized representative of

Signature of a member or authorized representative of a member

Typed or printed name of signee