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COVER LETTER

Division of C			•
	te Services LLC		
SUBJECT:	Name of Lim	ited Liability Company	11.1 · · · · · · · · · · · · · · · · · ·
The enclosed Articles o	of Amendment and fee(s) are sub	omitted for filing.	
	pondence concerning this matter	_	
	George Tacury		
		Name of Person	
	B&J Corte Services LLC		
		Firm/Company	
	75 NW 116th ST		
		Address	
	Miami, FL 33168		
	1	City/State and Zip Code	· · · · · · · · · · · · · · · · · · ·
	bjcorteservices@gmail.com E-mail address: (to be used for future annual report noti:	fication)
For further information	concerning this matter, please c	all:	
George Tacury		772 446-2636 at ()	
Name	of Person	Area Code Daytim	e Telephone Number
Enclosed is a check for	the following amount:		
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	S55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
Mailing Addr Registration		Street Address: Registration Sec	ction

Division of Corporations P.O. Box 6327 Tallahassee, FL 32314

Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite 810 Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

B&J Corte Services 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 $\frac{08/15/2017}{2}$ and assigned Florida document number __1.17000174108 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 "LLC". 75 NW 116th ST Miami FL 33168 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: George Tacury Name of New Registered Agent: 75 NW 116th ST New Registered Office Address: Enter Florida street address _. Florida 33168
Zip Code Miami

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.

City

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>	Type of Action
AMBR	Hemando Romero		□Add
		3790 SW 108th Ave Miami FL33165	■ Remove
			□Change
MGR	Hernando Romero		
		3790 SW 108th Ave Miami FL33165	■Remove
		.	□Change
AMBR	George Tacury	75 NW 116th ST Miami, FL 33168	
			□Remove
			
MGR	George Tacury	75 NW 116th ST Miami, FL 33168	■ Add 202
			CARemove CAR
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			□Change
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			□Remove
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Effective date, if other than the date (If an effective date is listed, the date must be specified).	of filing:	te of filing or more than 90 da	(optional)	ant to 605,0207 (
Note: If the date inserted in this block d document's effective date on the Department.	loes not meet the applicable:	statutory filing requiremen	its, this date will no	ot be listed as t
the record specifies a delayed efform.) The 90th day after the record i		effective time, at 12	:01 a.m. on th	e earlier of:
Dated January 27	2020			
Signa	ature of a member or authorized	representative of a member		
1				
Hernando Romero	Typed or printed nar	no of signer		

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Filing Fee: \$25.00