L17000263367

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SECRETARY OF STATE FALL AHASSEE FLORIDA

JUN 2 4 2019 T SCHAROEDER

COVER LETTER

SURJEC		LC:			
SOBJEC	1	Name of Lim	ited Liability Company		
The enclo	osed Articles of	Amendment and fee(s) are sub	mitted for filing.		
Please ret	um all correspo	ondence concerning this matter	to the following:		
		JOSE RAFAEL PORRAS	HERNANDEZ.		
			Name of Person		
JORXS, LLC Firm/Company 211 WIMBLEDON LAKE DR Address PLANTATION, FL 33324 City/State and Zip Code JORXS, LLC@GMAIL.COM E-mail address: (to be used for future annual report notification) For further information concerning this matter, please call: JOSE RAFAEL PORRAS HERNANDEZ at (Area Code Daytime Telephone Number Enclosed is a check for the following amount: Enclosed is a check for the following amount: Certificate of Status Certified Copy Certificate (additional copy is enclosed) Certificate Certified Copy Certified					
		*******	Printited for filing. Ito the following: HERNANDEZ Name of Person Firm/Company E DR Address 4 City/State and Zip Code DM (to be used for future annual report notification) all:		
	Division of Corporations CCT: Some of Limited Liability Company				
			Address		
		PLANTATION, FL 33324			
		JORXS.LLC@GMAIL.CO	· •		
		E-mail address: (to be used for future annual report notifi	ication)	
For further	er information c	oncerning this matter, please ca	all:		
JOSE RA	AFAEL PORRA	AS HERNANDEZ	754 3174561		
	Name o	f Person	Area Code Daytime	Telephone Number	
Enclosed	is a check for the	he following amount:			
\$25.0	0 Filing Fee		Certified Copy	Certificate of Status & Certified Copy	

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**

JORXS, LLC		
(Name of the Limited Liability Compa (A Florida Limited	any as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company	and assigned	
Florida document number L17000263367		-
This amendment is submitted to amend the following:		
(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 December 28, 2017 and assigned Florida document number L17000263367 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: JORXS, LLC		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
(Principal office address MUST BE A STREET ADDRESS)	211 WIMBLEDON LAKE DR	19 19
	PLANTATION, FLORIDA 33324	7. E
Enter new mailing address, if applicable:	JORXS, LLC	* 10
	211 WIMBLEDON LAKE DR	
	PLANTATION, FLORIDA 33324	
		Ser en
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her	ffice address on our records, <u>ente</u> <u>e</u> :	r the name of the new
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida street address	
		
	•	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>	Address	Type of Action
MGR	JOSE REFAEL PORRAS HERNANDEZ	· · · · · · · · · · · · · · · · · · ·	
			Remove
		211 WIMBLEDON LAKE DR PLANTATION FLORIDA, 33324	= Change
MGR	MARIA EUGENIA CONTRERAS BIGOTT	7874 NW 7TH CT PLANTATION FLORIDA, 33324	
			■ Remove
			□ Change
			Add 19 Janove F IL E D Change F 1008/00.
			C Remove
			□ Change
			□ Remove
			□ Change
			□ Remove
			Change

If amending any	other information, enter change(s) here: (Atta	ach additional sheets, if necessary.)	
			
			
			
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If an effective date is li Note: If the date in	other than the date of filing: sted, the date must be specific and cannot be prior to date of serted in this block does not meet the applicable state date on the Department of State's records.	(optional) of filing or more than 90 days after filing.) Pursuant to 605.0 atutory filing requirements, this date will not be listed)207 (i as t
	ies a delayed effective date, but not an e after the record is filed.	effective time, at 12:01 a.m. on the earlier	r of:
Dated June 06	, 2019		
)	
	Signature of a member or authorized re	epresentative of a member	
	JOSK YOK	2265	
	Typed or printed name	of signee	

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Filing Fee: \$25.00