Florida Department of State

Division of Corporations **Electronic Filing Cover Sheet**

Note: Please print this page and use it as a cover sheet. Type the fax audit number (shown below) on the top and bottom of all pages of the document.

(((H18000336026 3)))



H180003360263ABC\$

Note: DO NOT hit the REFRESH/RELOAD button on your browser from this page. Doing so will generate another cover sheet.

To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : THERREL BAISDEN, LLP

Account Number : I20140000065 : (305)371-5758 Phone

Fax Number : (305)371-3178

**Enter the email address for this business entity to be used for futu annual report mailings. Enter only one email address please. **

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN J&J 1100, LLC

Certificate of Status	0
Certified Copy	0
Page Count	0.5
Estimated Charge	\$25.00

Electronic Filing Menu

Corporate Filing Menu

Help

COVER LETTER

TO:	Registration Se Division of Cor			
	ا (100 لھار	LLC		
SUBJE	ECT:	Name of Lim	ited Liability Compuny	
Th	alauad dulfulan af	Amendment and fee(s) are sub	mitted the Filipe	
Please:	return all correspo	indence concerning this matter	to the following:	
		MARK M. HASNER, ESC	Q .	
			Nume of Person	
		THERREL BAISDEN, LI	,ρ	
			Firm/Company	
1 SE 3RD AVENUE, SUITE 2950			TE 2950	18 M 26 M 8:52
Address				
		- Strict		
City/State and Zip Code				
		MHASNER@THERRELB	AISDEN, COM to be used for future annual report notifi	
For the	ther information o	oncerning this matter, please c		**************************************
	(M, HASNER, E	•	305 371-5758	
Name of Person		f Person	Area Code Daytime	Telephone Number
Enclose	ed is a check for th	ne following amount:		
\$2:	5,00 Filing Fee	□ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filling Fee & Certified Copy (additional copy is enclosed)	☐ \$60.00 Filing Fee, Certificate of Status & Certified Copy (edditional copy is enclosed)
				OR A DODGES

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 Tollahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

1&1 1100, LLC	·
(Name of the Limited Liability Comm (A Fiorida Limited	nny as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L18000083504</u>	y were filed on April 4, 2018 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited lia	bility company here:
The new name must be distinguishable and contain the words "Limited Llab	ility Company," the designation "LLC" or the abbreviation "L.L."
Enter new principal offices address, if applicable:	<u> </u>
(Principal office address MUST BE A STREET ADDRESS)	
	B. C.
Enter new mailing address, if applicable:	<u></u>
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered or registered agent and/or the new registered office address he	office address on our records, enter the name of the new
Name of New Registered Agent:	
	
New Registered Office Address:	Enter Florida street address
	. Florida
	City Zip Code
New Registered Agent's Signature, if changing Registered Agent	<u>i</u>
I hereby accept the appointment as registered agent and ag provisions of all statutes relative to the proper and complet accept the obligations of my position as registered agent as being filed to merely reflect a change in the registered offic company has been notified in writing of this change.	provided for in Chapter 605, F.S. Or, if this document is
ICCh.	anging Registered Agent, Signature of New Registered Agent

Page 1 of 3

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>	Name	Address	Type of Action
MOR	MARIO ECHEMENDIA	1100 W. S4TH STREET	
		HIALEAH, FL 33012	■ Remove
			C Change
			□ ∧dd
		<u> </u>	Remove
			Chaffe
			Add 26 A 8: 52
			□ Add
			□ Remove
			□ Change
			D Add
			□ Remove
			Change
			□ Add
		 	Remove
			Change

						
						
•						
·						
				·		
	- -		·			
					-	
			<u> </u>			0
						2
						777
			·	·	.	PSSEE TON
					 .	
						037
						40
ctive date if o	ther than the date o	f filing:			(optional)	
effective date is lis	ther than the date o ted, the date must be spec erted in this block doe	cific and cannot be p	rior to date of filir	g or more than 90 o	lays after filing.) Pr	urguant to 605,0207 (3
iment's effective	e date on the Departme	ent of State's reco	rds.	y mang redament	and, mid date m	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
ecord specific	es a delayed effec ifter the record is	tive date, but	not an effect	tive time, at 1	2:01 a.m. on	the earlier of:
ie soul day a	inter the record is					
a Novem	iber 26	2018				
	7					
			, , , , , , , , , , , , , , , , , , ,			

Page 3 of 3
Filing Fee: \$25.00