

L18000118798

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

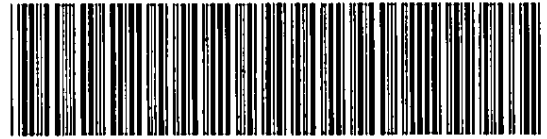
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

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05/18/18--01027--014

JUN -4 A 10:35

FILED

25.00

6/5/18

COVER LETTER

TO: Registration Section
Division of Corporations

SUBJECT: Nieves J&A LLC
Name of Limited Liability Company

enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

Angelica Camacho Nieves
Name of Person
Nieves J&A LLC
Firm/Company
11082 SW 70 Ln
Address
Miami, FL 33173
City/State and Zip Code
Brokerangelica@gmail.com
E-mail address: (to be used for future annual report notification)

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For further information concerning this matter, please call:

Angelica Camacho Nieves at (786) 357 8844
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- ☒ \$25.00 Filing Fee ☐ \$30.00 Filing Fee & Certificate of Status ☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed) ☐ \$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



FLORIDA DEPARTMENT OF STATE
Division of Corporations

May 21, 2018

ANGELICA CAMACHO NIEVES
11082 SW 70 LN
MIAMI, FL 33173

SUBJECT: NIEVES J&A LLC
Ref. Number: L18000118798

We have received your document for NIEVES J&A LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Please return your document, along with a copy of this letter, within 60 days of your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6051.

Dionne M Scott
Regulatory Specialist II

Letter Number: 218A00010538

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2018 JUN -4 A 35

RECEIVED

2018 JUN -4 PM 12:25

FLORIDA DEPARTMENT OF STATE
DIVISION OF CORPORATIONS
TALLAHASSEE, FL 32314

**ARTICLES OF AMENDMENT
TO
ARTICLES OF ORGANIZATION
OF**

Nieves J&A LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

Articles of Organization for this Limited Liability Company were filed on 05/11/2018 and assigned
Florida document number L18000118798

This amendment is submitted to amend the following:

If amending name, enter the new name of the limited liability company here:

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)

11082 SW 70 Ln

Miami, FL 33178

Enter new mailing address, if applicable:

Mailing address MAY BE A POST OFFICE BOX)

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:

Angelica Camacho Nieves

New Registered Office Address:

Enter Florida street address

City, Florida Zip Code

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

Attending Authorized Person(s) authorized to manage, enter the title, name, and address of each person being added removed from our records:

GR = Manager

IBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
AMBR	Angelica (name)	11082 SW 70 Ln	<input type="checkbox"/> Add
↑	Camacho (Middle)	Miami, FL 33173	<input type="checkbox"/> Remove
	Nieves (Last name)		<input checked="" type="checkbox"/> Change Title
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

I got married, attached you will
find the married certificate record
and a copy of my driver's licence

Thank You.

2019 JUL -4 A 10:35

Effective date, if other than the date of filing: 05/15/2018 (optional)

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

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.

The record specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of:
The 90th day after the record is filed.

Dated

May 15, 2018

Signature of a member or authorized representative of a member

Angelica Camacho Nieves

Typed or printed name of signee