

L18000241934

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐

PICK-UP

☐

WAIT

☐

MAIL

(Business Entity Name)

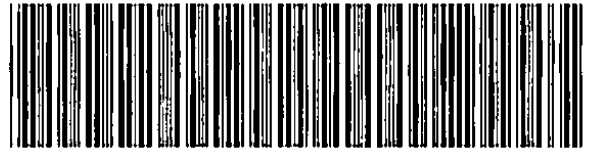
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2023 JUN 30 11:38:34

FILED



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

2022 DEC 20

December 20, 2022

MELANIE MARIA ROJAS  
19320 NW 56TH PLACE  
MIAMI, FL 33055

SUBJECT: M.J.J. PROPERTIES & INVESTMENT GROUP LLC  
Ref. Number: L18000241834

We have received your document for M.J.J. PROPERTIES & INVESTMENT GROUP 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 document number of the name conflict is L22000049852.

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

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Alecia Rivers  
Regulatory Specialist II

Letter Number: 422A00028318

2023 JAN 30 11 3:34

JAN 30 2023

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** M.J.J. PROPERTIES & INVESTMENT GROUP 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:

Melanie Rojas

\_\_\_\_\_  
Name of Person

M.J.J. PROPERTIES & INVESTMENT GROUP LLC

\_\_\_\_\_  
Firm/Company

19320 NW 56th Place

\_\_\_\_\_  
Address

Miami Gardens, FL 33055

\_\_\_\_\_  
City/State and Zip Code

mel.rojas622@gmail.com

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

For further information concerning this matter, please call:

Melanie Rojas

786

438-6859

at (\_\_\_\_\_) \_\_\_\_\_

\_\_\_\_\_  
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 Address:**

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

**TO  
ARTICLES OF ORGANIZATION  
OF**

M.J.J. PROPERTIES & INVESTMENT GROUP 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 10/12/2018 and assigned  
Florida document number L18000241834.

This amendment is submitted to amend the following:

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

Supreme Team Properties LLC.

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)**

11322 Miramar Pkwy #1095

Miramar, FL 33025

**Enter new mailing address, if applicable:**

**(Mailing address MAY BE A POST OFFICE BOX)**

11322 Miramar Pkwy #1095

Miramar, FL 33025

**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:

Enter Florida street address

Florida

City

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

**MGR = Manager**  
**AMBR = Authorized Member**

**AMBR = Authorized Member**

| <u>Title</u> | <u>Name</u>     | <u>Address</u>        | <u>Type of Address</u>                     |
|--------------|-----------------|-----------------------|--|
| AMBR         | ANACREON, JARIS | 7900 OAK LN STE 400   | <input type="checkbox"/> Add               |
|              |                 | MIAMI LAKES, FL 33016 | <input checked="" type="checkbox"/> Remove |
|              |                 |                       | <input type="checkbox"/> Change            |
|              |                 |                       | <input type="checkbox"/> Add               |
|              |                 |                       | <input type="checkbox"/> Remove            |
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(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 605.020

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

2022

Signature of a member or authorized representative of a member

Signature of a member or authorized representative of a member

Typed or printed name of signee

Filing Fee: \$25.00