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COVER LETTER

тb:	Registration Se Division of Cor			
CHDII	JUAN BRO	OCK, LLC		
SUBJ	ECT:	Name of Lin	nited Liability Company	
The en	nclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please	return all correspo	ondence concerning this matter	to the following:	
		JEAN CARLOS CAMEJO	PEREZ	
			Name of Person	
		221 NW 8TH AVE APT #20	Firm/Company 07	
		HALLANDALE BEACH, FL	Address . 33009	<u> </u>
		-	City/State and Zip Code	
		E-mail address; (to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please c	all:	
	Name o	f Person	at () Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
■ \$2:	5.00 Filing Fee	□ \$30.90 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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JUAN BROCK, 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 Florida document number L19000057900	were filed on 02/22/2019 a		
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited liab	ility company here:		
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the abbreviati		
Enter new principal offices address, if applicable:	221 NW 8TH AVE APT #207		
(Principal office address MUST BE A STREET ADDRESS)	HALLANDALE BEACH, FL 33009		
Enter new mailing address, if applicable:	221 NW 8TH AVE APT #207		
(Mailing address MAY BE A POST OFFICE BOX)	HALLANDALE BEACH, FL 33009		
B. If amending the registered agent and/or registered of registered agent and/or the new registered office address her			
Name of New Registered Agent:			
New Registered Office Address:	:.		
	Enter Florida street address		
Now Degistered Agent's Cinnetum if shanning Desired Assess	City Zip C		
New Registered Agent's Signature, if changing Registered Agent:			
I hereby accept the appointment as registered agent and agree	ge to act in this capacity. I further agree to c		

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to coprovisions of all statutes relative to the proper and complete performance of my duties, and I am familiar accept the obligations of my position as registered agent as provided for in Chapter 605. F.S. Or, if this debeing filed to merely reflect a change in the registered office address, I hereby confirm that the limited liad company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered A

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each peopre emoved from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	Name	Address T
MGR	VANESSA ROSALES	Address 1958 MCKINLEY ST, APT, 18 HOLLYWOOD, FL 33020
AMBR	JEAN CARLOS CAMEJO PEREZ	221 NW 8TH AVE APT #207 HALLANDALE BEACH, FL 33009
	ANDREA GARRIDO	t
MGR	ANDREA GARRIDO	Ę
		1958 MCKINLEY STREET, APT #18 2010 1958 MCKINLEY STREET, APT #18
		
		

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	09/16/2019
<u>Note:</u> 1	ce date, if other than the date of filing:
If the reco	ard specifies a delayed effective date, but not an effective time, at $12:01\ a.m.$ on the e $90th\ day$ after the record is filed.
Dated _	
	_ Cffic
	Signature of a member or authorized representative of a member
	Variessa. Zosiles.
	Typed or printed name of signee

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

Page 3 of 3

Filing Fee: \$25.00