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## **COVER LETTER**

то:	Registration Se Division of Cor			
		JEMA 1166 LLC		
SUBJI	ECT:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub-	mitted for filing.	
Please	teturn all correspo	ondence concerning this matter	to the following:	
			JESUS D MAYORCA	
			Name of Person	
			JEMA 1166 LLC	
			Firm/Company	
		2	604 SAN SIMEON WAY	
			Address	****
			KISSIMMEE, FL 34741	
			City/State and Zip Code	
jdma1966@gmail.com  E-mail address; (to be used for future annual re				ication)
For fur	ther information c	oncerning this matter, please or		
	5 D MAYORCA	•	407 759-9722	
	Name o	l'Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	ne following amount:		
<b>=</b> \$2:	5.00 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:

TO:

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

JEMA 1	166 LLC	
(Name of the Limited Liability Compa (A Florida Limited )	iny as It now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document numberL19000109759	were filed on <u>04/22/2019</u>	and assigned
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 al	obreviation "L.L.C."
Enter new principal offices address, if applicable:		19
(Principal office address MUST BE A STREET ADDRESS)		
		<u> </u>
Enter new mailing address, if applicable:		PR 2
(Mailing address MAY BE A POST OFFICE BOX)		00 (4 to 10
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:		the name of the new
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 agr provisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as p being filed to merely reflect a change in the registered office company has been notified in writing of this change.	performance of my duties, and I am provided for in Chapter 605, F.S. Or,	familiar with and if this document is

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	MARY E GACIA	2604 SAN SIMEON WAY	Add
		KISSIMMEE, FL 34741	☐ Remove
			☐ Change
MGR	LEANDRO J MAYORCA	2604 SAN SIMEON WAY	
		KISSIMMEE, FL 34741	Remove
			Change
MGR	JESUS D MAYORCA	2604 SAN SIMEON WAY	
		KISSIMMEE, FL 34741	□ Remove
			☐ Change 🙃
			Add. S
			Remove Remove 20 Change 20
			Change 70
			🗀 Add
			□ Remove
			Change
			Add
			□ Remove
			☐ Change

	tion, enter change(s) here: (Attach addit	tional sheets, if necessary.)	
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		 <u>-</u>	2: <b>2</b> 2
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Note: If the date inserted in this blo	07/15/2019 date of filing: be specific and cannot be prior to date of filing or a ck does not meet the applicable statutory filing partment of State's records.		
If the record specifies a delayed (b) The 90th day after the reco	effective date, but not an effective rd is filed.	time, at 12:01 a.m. on the earlie	er of:
Dated JULY 20TH	. 2019		
		-	
	Signature of a member or authorized representative	e of a member	
JES	US D MAYORCA		
	Typed or printed name of signee		

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Filing Fee: \$25.00