Division of Corporations

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.

(((H22000328435 3)))



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To:

Division of Corporations

Fax Number : (850)617-6383

From:

Account Name : PETER MATHISON LLC

Account Number : I20210000152

Phone : (305)520-9343

Fax Number

: (786)705-2040

00

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

Zmail	Address:	
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN J&R BUSINESS CENTER LLC

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Certificate of Status	V	
Certified Copy	0	
Page Count	05	. BRUMBLEY
Estimated Charge	\$25.00	FP 2 6 2022
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Electronic Filing Menu

Corporate Filing Menu

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COVER LETTER

TO: Registration S Division of Co		•	•
OHD HOZEF	J&R BUSIN	ESS CENTER LLČ	
SUBJECT:	Name of Lim	ited Liability Company	
The enclosed Articles o	f Amendment and fee(s) are sub-	mitted for filing.	
Please return all corresp	ondence concerning this matter	to the following:	
	FF	RNANDO VILLARREAL	
		Name of Person	
	E	PETER MATHISON LLC	
		Firm/Company	
	800 \$	SE 4TH AVENUE, SUITE 139	
		Address	
	HAL	LANDALE BEACH, FL 33009	
		City/State and Zip Code	
		TUCONTADORENMIAMI.CO	
		to be used for future annual report no	tireation)
For further information	concerning this matter, please c	all:	
FERNANDO	VILLARREAL	305 at ()	520-9343
Name	of Person	Area Code Daytii	me 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)
<u>Mailing Addr</u>	ess:	Street Address:	
Registration	Section	Registration S Division of Co	
P.O. Box 63	Corporations 27	The Centre of	
Tallahassee.		2415 N. Monr Tallahassee, F	roe Street, Suite 810 L 32303

Sep 22, 2022 11:36 (UTC-03)

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J&R BUSINE	SS CENTER LLC		
(Name of the Limited Liability Co. (A Florida Limit	npany as it now appears led Liability Company)	on our records.)	
The Articles of Organization for this Limited Liability Comparing L19000273886	any were filed on	11/01/2019	and assigned
This amendment is submitted to amend the following:			
A. If amending name, enter the new name of the limited I	iability company her	<u>'e</u> :	s 2
			-4F1 2
The new name must be distinguishable and contain the words "Limited L	iability Company," the de	signation "LLC or the	
Enter new principal offices address, if applicable:	-		<u> </u>
(Principal office address MUST BE A STREET ADDRESS		<u> </u>	SS
		-	SO A
			<u> </u>
			2.
Enter new mailing address, if applicable:			<u>ap</u>
(Mailing address MAY BE A POST OFFICE BOX)			
B. If amending the registered agent and/or registered offi agent and/or the new registered office address here: Name of New Registered Agent:	ce address on our re	cords, <u>enter the n</u>	ame of the new registered
New Registered Office Address:			
	Enter Flori	da street address	
		, Florida	
	City		Zip Code
New Registered Agent's Signature, if changing Registered Age	ent:		
I hereby accept the appointment as registered agent and a provisions of all statutes relative to the proper and compt accept the obligations of my position as registered agent being filed to merely reflect a change in the registered off company has been notified in writing of this change.	lete performance of t as provided for in C	ny duties, and 1 a hapter 605, F.S. (m familiar with and Or, if this document is
II	Changing Registered Age	nt, 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

Sep 22, 2022 11:36 (UTC-03)

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	UPHAUS, VICTOR W	800 SE 4TH AVENUE, SUITE 139	= Add
		HALLANDALE BEACH, FL 33009	□Remove
			□Change
			□Add
			Remove
			□Change
			□Add
			∐Remove
			Change
			□Add
			□Remove
			□Add
			Remove
			Change
			□Add
			Remove
			□Change

_	
_	
Note: If	e date, if other than the date of filing:
e record s rd is filed	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
Dated _	20TH DAY OF SEPTEMBER 2022
	Eest
	Signature of a member or authorized representative of a member
	TROCCOLI AIELLO JUAN C
	Typed or printed name of signee

Filing Fee: \$25.00