L20000241621

(Requ	estor's Name)	
(Addre	ess)	_
(Addre	ess)	
(City/S	State/Zip/Phon	e #)
PICK-UP	☐ WAIT	MAIL
(Busin	ess Entity Nar	me)
(Docu	ment Number))
Certified Copies	Certificates	s of Status
Special Instructions to Fili	ng Officer:	





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COVER LETTER

TO:

Registration Section

Tallahassee, FL 32314

Division of Corp	orations		
SUBJECT: J V	FRA STU	ited Liability Company	
The enclosed Articles of A	mendment and fee(s) are sub	mitted for filing.	
Please return all correspon	dence concerning this matter t	to the following:	
	_	Vera SEIN Name of Person	<u> </u>
		Firm/Company	TERRACE A 33330 Determinal report notification) Terrace of Section and Company of the Company
	2701 SW	1415T TEP	NACE
	DAVIE, F	FLOBIDA 3 City/State and Zip Code	<u> 3330</u>
	E-mail address: (t	o be used for future annual report noti	tudio ogmáil com
	matter, preuse ea	••••	
1. liette Vira	9 95K 187 G Z 1 Person	at (<u>154</u>) <u>703 (</u> Area Code Daytim	7108 e Telephone Number
Enclosed is a check for the	following amount:		
2 \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	
Mailing Address: Registration So Division of Co P.O. Box 6327	ection orporations	Street Address: Registration Se Division of Cor The Centre of T	porations

2415 N. Monroe Street. Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

J VERA STUDIO	LLC
(A Florida Limited (A Florida Limited)	nany as it now appears on our records.) Liability Company)
The Articles of Organization for this Limited Liability Company Florida document number <u>L20000241621</u> .	y were filed on August 10, 2020 and assigned
This amendment is submitted to amend the following:	
A. If amending name, enter the new name of the limited liab	bility company here:
The new name must be distinguishable and contain the words "Limited Liabi	oility 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)	
	720
Enter new mailing address, if applicable:	FIL 30
(Mailing address MAY BE A POST OFFICE BOX)	
B. If amending the registered agent and/or registered office a agent and/or the new registered office address here:	address on our records, enter the name of the new register
Name of New Registered Agent:	
New Registered Office Address:	
	Enter Floridu 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

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
AMBR	Juliette Vera Eskinazi	7701 SW 1415 TEB CAVIC PL 3	3330 ■ Add
			□Remove
			Change
CEO	Juliette Vera Eskinazi		□Add
		7701 SW 1415+ TER Davie FL 3	
			Change Change NOV CO
			
			PH CIRCEMOVE 4: 57 □ Change
			∪ □Change
			□Add
			□Remove
			□Change
			□Remove
			Change
			□Add
			□Remove
			□Change

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an effe ote:	we date, if other than the date of filing:
ecoro is file	I 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 ed.
ated _	November 17. 2020.
	Signature of a member or authorized representative of a member