LZO 000288161

| (Requestor's Name) |
|---|
| (Address) |
| (Address) |
| (City/State/Zip/Phone #) |
| PICK-UP WAIT MAIL |
| (Business Entity Name) |
| (Document Number) |
| Certified Copies Certificates of Status |
| Special Instructions to Filing Officer: |
| |
| |
| |
| <u> </u> |





500353095125

10/09/20--01008---005 **25.00

NOV 1 6 2020

S. YOUNG

PARA GET -9 PM 4: 41

COVER LETTER

| TO: | Registration So Division of Co | ection rporations | | | | |
|---|-----------------------------------|--|---|--|--|--|
| CHDIE | | ROUP LLC | | | | |
| SUDJE | CT: | Name of Lin | nited Liability Company | | | |
| The encl | losed Articles of | Amendment and fee(s) are sub | omitted for filing. | | | |
| Please ro | eturn all correspo | ondence concerning this matter | to the following: | | | |
| | | Juan C. Betancourt | | | | |
| | | | Name of Person | | | |
| The encl Please ro For furth Juan C. I | | Janac Group LLC | | | | |
| | | · · · · · · · · · · · · · · · · · · · | Firm/Company | | | |
| | 8521 NW 138 Terrace Unit 1810 | | | | | |
| | Address | | | | | |
| | | Miami Lakes, FL 33016 | | | | |
| | City/State and Zip Code | | | | | |
| | | jucabe67@gmail.com E-mail address: (| to be used for future annual report noti | (Teation) | | |
| For furth | er information c | oncerning this matter, please c | · | iculon) | | |
| Juan C. I | Betancourt | | 786 2815491 at () | | | |
| | Name o | f Person | | e Telephone Number | | |
| Enclosed | is a check for th | ne following amount: | | | | |
| ■ \$2 5.0 | 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 Addros | ٠. | 6 | | | |

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

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2

| Janae Group LLC | | 13 |
|---|--|--|
| (<u>Name of the Limited Liabil</u> (A Floric | lity Company as it now appears on la Limited Liability Company) | our records.) |
| | - 9/1 1/2 <i>0</i> | 20 17 |
| The Articles of Organization for this Limited Liability (| Company were filed on 2014/20 | and assigned |
| Florida document number L20000288161 | | The state of the s |
| This amendment is submitted to amend the following: | | ÷ 6 |
| A. If amending name, enter the new name of the lin | nited liability company here: | |
| The new name must be distinguishable and contain the words "Lin | mited Liability Company," the design | nation "LLC" or the abbreviation "L.L.C." |
| Enter new principal offices address, if applicable: | | |
| (Principal office address MUST BE A STREET ADD | RESS) | |
| | | |
| | | |
| Enter new mailing address, if applicable: | | |
| (Mailing address MAY BE A POST OFFICE BOX) | | |
| | | |
| | | |
| B. If amending the registered agent and/or register | ed office address on our recor | ds, 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 s | treet 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 |
|--------------|-------------------|-------------------------------|----------------|
| MGR | Juan C Betancourt | 8521 NW 138 Terrace Unit 1810 | = Add |
| | | Miami Lakes, Fl. 33016 | |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | Remove |
| | | | □ Change |
| | | | |
| | | | □Remove |
| | | | □Change |
| | | | □Add |
| | | | □Remove |
| | | | □Change |

| | mending any other information, enter change(s) here: (Attach additional sheets, if necessary.) | |
|---------------------------|---|--------------------------------------|
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | |
| | | ··· |
| | | |
| | | - |
| | | |
| | | |
| | | • |
| | | |
| | | |
| | | - |
| | | |
| lf an efi <u>Note:</u> | etive date, if other than the date of filing: | ant to 605,0207 ot be listed as 1 |
| record is fi | ord specifies a delayed effective date, but not an effective time, at 12:01 a.m. on the earlier of: (b) The 90th filed. | day after the |
| Dated | Ochoben 5 2020 | |
| | | |
| | fignature of a member or authorized representative of a member | |
| | Tan BETAN COURT Typed or printed name of signee | |

Etti E assure