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(Re	equestor's Name)	
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PICK-UP	☐ WAIT	MAIL
(Bu	siness Entity Name	e)
(Do	ocument Number)	
Certified Copies	_ Certificates o	of Status
Special Instructions to	Filing Officer:	
		5/24/21 Tm

Office Use Only



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COVER LETTER

TO: Registration Se Division of Cor			
SUBJECT:	CAJER	LL C	
	Name of Lim	ited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please return all correspo	ondence concerning this matter	to the following:	
	Jean	- Paul Ch	avez
	Ca	- Paul Ch Name of Person Jeri LL	<u></u>
		r im/Company	
	7460	S W 6 1 Address	ST
	M, a	mi FL	33143
	E-mail address: (1	City/State and Zip Code a.vlchavez@ to be used for future annual report noti	Smail com
For further information c	concerning this matter, please ca	all:	
	1 Chavez	at (305) 76 Area Code Daytim	98-1157
Name (f Person	Area Code - Daytim	e Telephone Number
Enclosed is a check for the	he 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)

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

CAJEI	RI, LLC	21 APR -2 AM 10: 01
(Name of the Limited Liabil (A Florid	ity Company as it now appears on c a Limited Liability Company)	our records.)
The Articles of Organization for this Limited Liability Colorida document number <u>L 210000 545</u>	Company were filed on2/	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the lim	ited liability company here:	
The new name must be distinguishable and contain the words "Lin	nited Liability Company," the designa	tion "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 registere agent and/or the new registered office address here:	d office address on our record	ls, <u>enter the name of the new registered</u>
Name of New Registered Agent:		
New Registered Office Address:		
	Enter Florida str	
	City	, Florida 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 CIVISION OF CORECASION

21 APR -2 AM 10: 01

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Jean-Paul Chavez	1460 SW 6/51 Miami, FL 331	□ Add
		Miami, FL 331	43 □Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
		<u> </u>	□Add
			□Remove
			Change

If amendi	ing any other information, enter change(s) here: (Attach additional sheets, if necessary) (1)
	21 APR -2 APTO: 01
 -	
-	
_	
If an effectiv	date, if other than the date of filing:
e record sp rd is filed.	pecifies 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	March 29 2021
	Signature of a member or authorized representative of a member
	Jean-Paul Chavez
	Typed or printed name of signee