L210000085527

· · · · · · · · · · · · · · · · · · ·	(Requestor's Name)
	(Address)
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	(Business Entity Name)
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COVER LETTER

'TO: Registration S Division of Co			
J & M HO SUBJECT:	ME ENTERPRISE, LLC		
SUBJECT:	Name of Lin	nited Liability Company	
The enclosed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please return all correspond	ondence concerning this matter	to the following:	
	JOSE SANTANA		
		Name of Person	
	J & M HOME ENTERPR	ISE, LLC	
	·	Firm/Company	 ,
	2535 NE 135TH STREET		
		Address	
	NORTH MIAMI, FL 334	81	:
		City/State and Zip Code	-
	E-mail address: (to be used for future annual report no	otification)
For further information of	concerning this matter, please c	all:	
JOSE SANTANA		305 986-2584 at()	
Name o	of Person	Area Code Dayti	me Telephone Number
Enclosed is a check for t	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)
<u>Mailing Addre</u> Registration		Street Address: Registration S	ection
Division of C	Corporations	Division of Co	orporations
P.O. Box 631		The Centre of	
Tallahassee,	rに 32314	2415 N. Monr	oe Street, Suite 810

Tallahassee, FL 32303

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2021 APR -2 AH 8: 1,1

J & M HOME ENTERPRISE, LLC

(Name of the Limited Liability Company as it now appears on our records.)
(A Florida Limited Liability Company)

The Articles of Organization for this Limited Liab Florida document number L21000085527		RY 22, 2021 and assigned
This amendment is submitted to amend the follow	ing:	
A. If amending name, enter the new name of th	e limited liability company here:	
N/A		<u> </u>
The new name must be distinguishable and contain the word	s "Limited Liability Company," the designation	on "LLC" or the abbreviation "LLL.C."
Enter new principal offices address, if applicable	N/A	
(Principal office address MUST BE A STREET)	ADDRESS)	
Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BO) B. If amending the registered agent and/or regingent and/or the new registered office address by	stered office address on our records	enter the name of the new registered
Name of New Registered Agent:	JOSE SANTANA	
New Registered Office Address:	N/A	
	Enter Florida stree	t address
•	Cuy	, 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

<u>Title</u>	<u>Name</u>	Address	2021 AFR -2	AH 8: 41	Type of Action
MGR	JOSE SANTANA	2535 NE 135TH	•		🗆 Add
		NORTH MIAMI.	, FL 33181	·	□Remove
					≡ Change
MGR	MAYRA SANTANA	2535 NE 135TH			🗆 Add
		NORTH MIAMI,	. FL 33181		□Remove
			~		
					□Add
					□Remove
					[]Change
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ective date, if other than the date effective date is listed, the date must be set. If the date inserted in this block cument's effective date on the Depart	pecific and cannot be prior to loes not meet the applicab	o date of filing or more that the statutory filing requ	(optional) n 90 days after filing.) Pursua irements, this date will no	nt to 605.0207 t be listed as
cord specifies a delayed effective dat s filed.	e, but not an effective tim	ie, at 12:01 a.m. on the	earlier of: (b) The 90th o	lay after the
ed APRIL 01	2021			
	The state of the s	ized representative of a n		

Filing Fee: \$25.00