

L21 000194573

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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[Signature]

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U.S. COURT

Doral, June 12, 2021

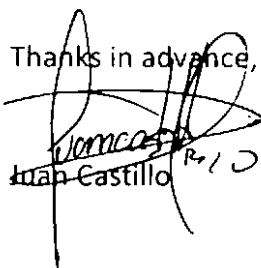
Florida Department Of State  
Division of Corporation

Please find attached our update records with changes for our corporation JBS Trading LLC, my phone number is +1(786)302-7145.

Our return address is

11091 NW 27<sup>th</sup> Street  
Suite 205  
Doral, FL 33172  
Attn. Juan Castillo

Thanks in advance,

  
~~Juan Castillo~~ RJC

## COVER LETTER

TO: Registration Section  
Division of Corporations

SUBJECT: JBS TRADING LLC  
Name of Limited Liability Company

The enclosed Articles of Amendment and fee(s) are submitted for filing.

Please return all correspondence concerning this matter to the following:

JUAN CASTILLO

Name of Person

Firm/Company

11091 NW 27TH ST SUITE 205

Address

DODAL, FL, 33172

City/State and Zip Code

juancastilloh3@me.com

E-mail address (to be used for future annual report notification)

For further information concerning this matter, please call:

JUAN CASTILLO

Name of Person

at ( 786 )

Area Code

3027145

Daytime 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)

**MAILING ADDRESS:**  
Registration Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**STREET/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

**ARTICLES OF AMENDMENT  
TO  
ARTICLES OF ORGANIZATION  
OF**

JBS TRADING 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 Liability Company were filed on Florida and assigned  
Florida document number L21000194573.

This amendment is submitted to amend the following:

**A. If amending name, enter the new name of the limited liability company here:**

The new name must be distinguishable and contain the words "Limited Liability 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)

**Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**B. If amending the registered agent and/or registered office address on our records, 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 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>	<u>Address</u>	<u>Type of Action</u>
AMBR	MERCADO, ERNESTO A	11091 NW 27 <sup>th</sup> ST SUITE 205	<input type="checkbox"/> Add
		DORAL, FL, 33172	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MERCADO, JOSE M	11091 NW 27 <sup>th</sup> ST SUITE 205	<input type="checkbox"/> Add
		DORAL, FL, 33172	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	SALVADOR, Ridelalora	11091 NW 27 <sup>th</sup> ST SUITE 205	<input checked="" type="checkbox"/> Add
		DORAL, FL, 33172	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

**D. If amending any other information, enter change(s) here:** *(Attach additional sheets, if necessary.)*

[illegible]

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(If an effective date is listed, the date must be specific and cannot be prior to date of filing or more than 90 days after filing.) Pursuant to 605.0207 (3)(b)

**Note:** If the date inserted in this block does not meet the applicable statutory filing requirements, this date will not be listed as the document's effective date on the Department of State's records.

If the record 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 record is filed.

Dated JUNE 08 . 2021

1  
[Signature]  
authorized representative of a

JUAN CASTILLO

Typed or printed name of signer

2021 JUN 17 PM 5:49