

L21 000 280 033

(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:

Procty

Office Use Only



400439508454

11/14/24--01014--018 ••25.00

FILED

2024 NOV 14 PM 5:19

SECRETARY OF STATE
TALLAHASSEE, FL

**TO: Registration Section
Division of Corporations**

JM INNOVATION GROUP, LLC

SUBJECT: _____
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:

Jose Martell Marchany

Name of Person

JM INNOVATION GROUP, LLC

Firm/Company

9314 Forest Hill Blvd, Suite 860

Address

Wellington, FL 33411

City/State and Zip Code

admin@martelcapitalholdings.com

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

For further information concerning this matter, please call:

Jose Martell Marchany

561 229-6623
at (_____) _____
Area Code Daytime Telephone Number

Name of Person

Enclosed is a check for the following amount:

- | | | | |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &
Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &
Certified Copy
(additional copy is enclosed) | <input type="checkbox"/> \$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

**TO
ARTICLES OF ORGANIZATION
OF**

JM INNOVATION GROUP, 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 06/16/2021 and assigned
Florida document number L21000280033.

This amendment is submitted to amend the following:

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

N/A

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)

9314 Forest Hill Blvd, Suite 860

Wellington, FL 33411

United States

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

9314 Forest Hill Blvd, Suite 860

Wellington, FL 33411

United States

FILED
2024 NOV 14 PM 5:19
SECRETARY OF STATE
TALLAHASSEE, FL

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:

Jose Martell Marchany

New Registered Office Address:

9314 Forest Hill Blvd, Suite 860

Enter Florida street address

Wellington

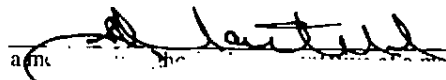
, Florida 33411

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

MGR = Manager
AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	<u>Address</u>	<u>Type of Action</u>
MGR	Jose Martell Marchany	9314 Forest Hill Blvd, Suite 860	<input type="checkbox"/> Add
		Wellington, FL 33411	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Juan Jose Martell Marchany	9314 Forest Hill Blvd, Suite 860	<input type="checkbox"/> Add
		Wellington, FL 33411	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
MGR	Marjorie Martell Marchany	9314 Forest Hill Blvd, Suite 860	<input type="checkbox"/> Add
		Wellington, FL 33411	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
N/A	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
N/A	N/A		<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
N/A	N/A		<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.)*

N/A

[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 November 07, 2024

Signature of a member or authorized representative of a member

Jose Martell Marchany

Typed or printed name of signee