# 121000469313

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DATE: 1/7/2022

NAME: JJN REAL ESTATE 11, LLLC

TYPE OF FILING: AMENDMENT

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### **COVER LETTER**

	egistration Se ivision of Cor			
cimina		ESTATE 11, LLLC		
SUBJECT	:	Name of Lim	ited Liability Company	
The enclos	ed Articles of	Amendment and fee(s) are sub	omitted for filing.	
Please retu	rn all correspo	ordence concerning this matter	to the following:	
		JONATHAN LEDER		
			Name of Person	······
		JONATHAN LEDER, PL	LC	
		<del></del>	Firm/Company	
		1717 N BAYSHORE DRI	VE, SUITE 215	
			Address	
		MIAMI, FL 33132		
			City/State and Zip Code	
		JLEDER@MAGICTITLE.	COM to be used for future annual rep	nort notification)
For further	information c	oncerning this matter, please c	·	on nonteation)
JONATHA	AN LEDER		305 514-(	
	Name o	f Person	Area Code	Daytime Telephone Number
Enclosed is	s a check for th	ne following amount:		
<b>⊠</b> \$25.00	) Filing Fee	S30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	S60.00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)
	lailing Addres		Street Add Revistrati	
Registration Section Division of Corporations		Registration Section Division of Corporations		
P.O. Box 6327			re of Tallahassee	
1	allahassee, l	FL 32314	2415 N. N	Monroe Street, Suite 810

Tallahassee, FL 32303

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJN REAL ESTATE 11, LLLC		
( <u>Name of the Limited Liability C</u> (A Florida Lin	ompany as it now appears on our recornited Liability Company)	<u>'ds.</u> )
The Articles of Organization for this Limited Liability Com Florida document number L21000469313	pany were filed on 10/28/2021	and assigned
This amendment is submitted to amend the following:		
A. If amending name, enter the new name of the limited	l liability company here:	
JJN REAL ESTATE 11, LLC		
The new name must be distinguishable and contain the words "Limited	Liability Company," the designation "LL	C" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:		
(Principal office address MUST BE A STREET ADDRES	<u> </u>	
	·	
Enter new mailing address, if applicable:		
Mailing address MAY BE A POST OFFICE BOX)		*.3
		15-1 15-1
B. If amending the registered agent and/or registered of	fice address on our records, ente	r the name of the new register
igent and/or the new registered office address here:	·	CO COMPANY
Name of New Registered Agent:		<u></u>
Tame of the Registered rigent.		- Fig. 03
New Registered Office Address:		1 * 1
	Enter Florida street addre	VSS
	, F	lorida
<del></del>	City	Zin Coda

### 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, <u>enter the title, name, and address of each person\_being added or removed from our records</u>:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
			□Add
		<del></del>	□Remove
			□Change
	<del></del>		□Add
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Note:	we date, if other than the date of filing:
the record cord is fil	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 ed.
Dated ]	ANUARY 7TH 2021
	Signature of a member or authorized representative of a member
	Tara Penick-Vose on behalf of Jonathan Leder
	Typed or printed name of signee

Filing Fee: \$25.00