

Florida Department of State
 Division of Corporations
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To:
 Division of Corporations
 Fax Number : (850)617-6383

From:
 Account Name : MBA ACTIVATION, LLC
 Account Number : I20130000007
 Phone : (786)439-9847
 Fax Number : (786)345-0566

****Enter the email address for this business entity to be used for future annual report mailings. Enter only one email address please.****

Email Address: sergueipm@gmail.com

19:36:50 11/15/2022

STATE OF FLORIDA
DIVISION OF CORPORATIONS

2022 NOV 15 PM 4: 15

APPROVED
AND
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LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JJ REMODELING.USA LLC

Certificate of Status	0
Certified Copy	0
Page Count	01

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ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JJ REMODELING.USA 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 01/31/2022 and assigned Florida document number L22000051289

This amendment is submitted to amend the following:

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

JJ Remodeling USA, LLC

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: 114 Hialeah Dr.

(Principal office address MUST BE A STREET ADDRESS)

Hialeah, FL 33010

Enter new mailing address, if applicable: 235 SW 32nd Ave.

(Mailing address MAY BE A POST OFFICE BOX)

Miami, FL 33135

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: Jaime Jaime Alfonso

New Registered Office Address: 114 Hialeah Dr.

Enter Florida street address

Hialeah, Florida 33010

City

Zip Code

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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

[Handwritten signature]

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>
MBR	Jaime Jaime Alfonso	114 Hialeah Dr.	<input type="checkbox"/> Add
		Hialeah, FL 33010	<input type="checkbox"/> Remove
		USA	<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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