

122000096348

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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PICK-UP

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WAIT

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MAIL

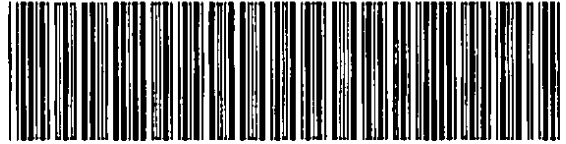
(Business Entity Name)

(Document Number)

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FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
22 JUL - 7 PM 4:59

T. MATTHEWS

JUL - 8 2022



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

RECEIVED

2022 JUL -7 PM 4:28

OFFICE OF THE  
TALLAHASSEE, FL

May 6, 2022

SANTIAGO J. PADILLA  
1395 BRICKELL AVENUE, SUITE 800  
MIAMI, FL 33131

SUBJECT: JAREXPORT LLC  
Ref. Number: L22000096348

We have received your document for JAREXPORT LLC and your check(s) totaling \$25.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The registered agent must sign accepting the designation.

Section 605.0203(1), Florida Statutes, requires the document(s) to be signed by one person acting as an authorized representative.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filing of your document, please call (850) 245-6050.

Tekayla T Matthews  
OPS

Letter Number: 222A00010466

## COVER LETTER

**TO: Registration Section  
Division of Corporations**

**SUBJECT:** Jarexport 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:

Eugenio Torres  
\_\_\_\_\_  
Name of Person  
  
\_\_\_\_\_  
Firm/Company  
  
1001 Brickell Bay Drive, Suite#2712  
\_\_\_\_\_  
Address  
  
Miami, FL 33131  
\_\_\_\_\_  
City/State and Zip Code  
  
aruiz@jarexport.net  
\_\_\_\_\_  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

\_\_\_\_\_  
Name of Person                      at (\_\_\_\_\_) \_\_\_\_\_  
Area Code                      Daytime Telephone Number

Enclosed is a check for the following amount:

- |  |  |  |  |
|--|--|--|--|
| <input checked="" type="checkbox"/> \$25.00 Filing Fee | <input type="checkbox"/> \$30.00 Filing Fee &<br>Certificate of Status | <input type="checkbox"/> \$55.00 Filing Fee &<br>Certified Copy<br>(additional copy is enclosed) | <input type="checkbox"/> \$60.00 Filing Fee,<br>Certificate of Status &<br>Certified Copy<br>(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

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

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS

22 JUL -7 PM 4:59

Jarexport 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 03/08/2022 and assigned  
Florida document number L22000096348.

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)

1001 Brickell Bay Drive, Suite#2712

Miami FL, 33131

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

1001 Brickell Bay Drive, Suite#2712

Miami FL, 33131

**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:

Eugenio Torres

New Registered Office Address:

1001 Brickell Bay Drive, Suite#2712

*Enter Florida street address*

Miami

*City*

Florida 33131

*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	Alejandra Villar	7741 NW 7TH ST, UNIT #321	<input type="checkbox"/> Add
		MIAMI, FL 33126	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	Eugenio Torres	1001 Brickell Bay Drive, Suite#2712	<input checked="" type="checkbox"/> Add
		Miami ,FL 33131	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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(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)

Dated 07/01, 2022

Alejandra V.

**Filing Fee: \$25.00**