

L22 000 464 153

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

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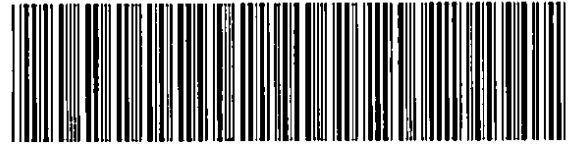
(Business Entity Name)

(Document Number)

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05/05/23--01002--001 **25.00

2023 MAY -5 PM 2:52

COVER LETTER

**TO: Registration Section
Division of Corporations**

SUBJECT: JAKITA 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:

LUIS ORLANDO ESPINOZA

Name of Person

JAKITA LLC

Firm/Company

60 SW 13TH ST # 5210

Address

MIAMI FL 33130

City/State and Zip Code

loespinod@gmail.com

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

For further information concerning this matter, please call:

CLAUDIA MILLAN

786

3270118

at (_____) _____

Name of Person

Area Code

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 Address:

Registration Section
Division of Corporations
The Centre of Tallahassee
2415 N. Monroe Street, Suite 810
Tallahassee, FL 32303

2023 MAY -5 PM 2:52

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

JAKYTA 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 10/28/2022 and assigned
Florida document number L22000464153.

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)

60 SW 13TH ST # 5210

MIAMI FL 33130

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

60 SW 13TH ST # 5210

MIAMI FL 33130

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:

LUIS ORLANDO ESPINOZA

New Registered Office Address:

60 SW 13TH ST # 5210

Enter Florida street address

MIAMI

City

Florida 33130

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.

Luis Orlando Espinoza

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	LUIS ORLANDO ESPINOZA DC	60 SW 13TH ST # 5210	<input type="checkbox"/> Add
		MIAMI FL 33130	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	GERMANIA JHANETH DOMING	60 SW 13TH ST # 5210	<input type="checkbox"/> Add
		MIAMI FL 33130	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	MARIA EMILIA ESPINOZA DOM	60 SW 13TH ST # 5210	<input type="checkbox"/> Add
		MIAMI FL 33130	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
AMBR	KASANDRA JANETH ESPINOZ	60 SW 13TH ST # 5210	<input type="checkbox"/> Add
		MIAMI FL 33130	<input type="checkbox"/> Remove
			<input checked="" type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
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			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change

2022-05-11

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.

Dated 64/21/2023

Luis Orlando Espinoza
Typed or printed name of signee