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To:

Division of Corporations  
Fax Number : (850)617-6383

From:

Account Name : SERBER & ASSOCIATES, P.A.  
Account Number : I20000000083  
Phone : (305)932-6262  
Fax Number : (305)933-9393

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

Email Address: INFO@SERBERUNIVERSITY.COM

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN  
PARTNER JJEM LLC

Certificate of Status	0
Certified Copy	0
Page Count	01
Estimated Charge	\$25.00

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

**PARTNER JJEM 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 01/18/2023 and assigned Florida document number L23000019706.

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 end with the words "Limited Liability Company," the designation "LLC" or the abbreviation "L.L.C."

Enter new principal offices address, if applicable:

20900 NE 30th Avenue

(Principal office address MUST BE A STREET ADDRESS)

Suite 401

Aventura FL 33180

Enter new mailing address, if applicable:

20900 NE 30th Avenue

(Mailing address MAY BE A POST OFFICE BOX)

Suite 401

Aventura FL 33180

**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:

New Registered Office Address:

Enter Florida street address

City, Florida 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

4 230000 3300 43

If amending the Managers or Authorized Member on our records, enter the title, name, and address of each Manager or Authorized Member 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>
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**D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)**

Please change address for all managers as well: EDUARDO SZKOLNIK, MAURICIO KIBLISKY

and JOHN SZKOLNIK to 20900 NE 30th Avenue, Suite 401, Aventura FL 33180

**E. Effective date, if other than the date of filing: \_\_\_\_\_ (optional)**

(The effective date must be specific, cannot be prior to date of receipt or filed date and cannot be more than 90 days after the date this document is filed by the Florida Department of State)

Dated January 23, 2023John Szkolnik (MemberManager)John Szkolnik

Digitally signed by John Szkolnik (Member Manager)

DN: cn=John Szkolnik (Member Manager), o, ou=As

Member Manager, email=SZKOLNIK@GMAIL.COM, c=US

Signature of a member or authorized officer of the corporation

Typed or printed name of signee