

7/30/24, 10:46 AM

Division of Corporations

Florida Department of State

Division of Corporations
Electronic Filing Cover Sheet

L24000033780

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(((H24000256342 3)))



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To:

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

From:

Account Name : WHOLE TAX PROFESSIONAL SERVICES, INC.
Account Number : 120200000179
Phone : (786)253-9951
Fax Number : (305)397-1052

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

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

Email Address: wholetax@gmail.com

LLC AMND/RESTATE/CORRECT OR M/MG RESIGN
JOMEL PRODUCTION, LLC

Certificate of Status	0
Certified Copy	0
Page Count	04
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M. SOLOMON

JUL 30 2024

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Corporate Filing Menu

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H24000256342

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JOMEL PRODUCTION, 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 01/17/2024 and assigned
Florida document number L24000033780.

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)

Enter new mailing address, if applicable:

(Mailing address MAY BE A POST OFFICE BOX)

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CLERK OF STATE
TALLAHASSEE, FLORIDA

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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:

MAYDELIN ESTEVEZ LOPEZ

New Registered Office Address:

9540 SW 140TH CT

Enter Florida street address

MIAMI

Florida 33186

City

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

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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>
MGR	MAYDELIN ESTEVEZ LOPEZ	9450 SW 140TH CT	<input type="checkbox"/> Add
		MIAMI, FL 33186	<input checked="" type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	MAYDELIN ESTEVEZ LOPEZ	9450 SW 140TH CT	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33186	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
AMBR	JOEL A. LEON CABRERA	9450 SW 140TH CT	<input checked="" type="checkbox"/> Add
		MIAMI, FL 33186	<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
			<input type="checkbox"/> Add
			<input type="checkbox"/> Remove
			<input type="checkbox"/> Change
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			<input type="checkbox"/> Change

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D. If amending any other information, enter change(s) here: (Attach additional sheets, if necessary.)

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SECRETARY OF STATE
TALLAHASSEE, FLORIDA

E. Effective date, if other than the date of filing: _____ (optional)

(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)

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.

If the record 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 record is filed.

Dated July 29 2024

Signature of a member or authorized representative of a member

MAYDELIN ESTEVEZ LOPEZ

Typed or printed name of signee