12400006163

(Requestor's Name)			
(Address)			
(,			
(Address)			
(City/State/Zip/Phone #)			
PICK-UP WAIT MAIL			
(Business Entity Name)			
(Document Number)			
Certified Copies Certificates of Status			
Special Instructions to Filing Officer:			





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06/14/24--01023--013 **25.00

K #54

COVER LETTER

TO: Registration S Division of Co					
	OUSING LLC				
SUBJECT:	Name of Lim	ited Liability Company			
The apploint Articles of	of Amendment and fee(s) are sub	mitted for filing			
Please return all corresp	nondence concerning this matter	to the following:			
	JALEE BRERA				
		Name of Person	_		
	JB. 55 HOUSING LLC				
		Firm/Company	_		
	217 N WESTMONTE D	₹ 2018			
	Address				
	ALTAMONTE SPRINGS FL 32714				
	services@opisas.com	City/State and Zip Code	_		
	- .	to be used for future annual report notification)			
For further information	concerning this matter, please c	nll:			
JALEE BRERA		39 3206252324 at()			
Name	of Person	Area Code Daytime Telephone Numb	er		
Enclosed is a check for	the following amount:				
■ \$25.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	(additional copy is enclosed) Certific	Filing Fee, cate of Status & cd Copy al copy is enclosed)		
Mailing Addr Registration Division of P.O. Box 63 Tallahassee	n Section Corporations 327	Street Address: Registration Section Division of Corporations The Centre of Tallahassee 2415 N. Monroe Street, Suite Tallahassee, FL 32303	810		

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

JB. 55 HOUSING LLC		
(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records.) Liability Company)	
The Articles of Organization for this Limited Liability Company Florida document number <u>L24000061631</u> This amendment is submitted to amend the following:	were filed on February 2nd, 2024	and assigned
A. If amending name, enter the new name of the limited liab	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC" or the	abbreviation "L.L.C."
Enter new principal offices address, if applicable:	150 SE 2ND AVE	
(Principal office address MUST BE A STREET ADDRESS)	STE 701	
	MIAMI, FL 33131	
Enter new mailing address, if applicable:	217 N Westmonte Dr	
(Mailing address MAY BE A POST OFFICE BOX)	Ste 2018	
	Altamonte Springs, FL 32714	
B. If amending the registered agent and/or registered office agent and/or the new registered office address here: Name of New Registered Agent: New Registered Office Address:	address on our records, enter the na	ame of the new registe
	, Florida,	Zip Code
New Registered Agent's Signature, if changing Registered Agent:		
I hereby accept the appointment as registered agent and agrorovisions of all statutes relative to the proper and complete accept the obligations of my position as registered agent as pheing filed to merely reflect a change in the registered office	performance of my duties, and I ar provided for in Chapter 605, F.S. C	m familiar with and Or, if this document is

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		

Title	<u>Name</u>	Address	Type of Action
			□Add
			□Remove
			□Change
			□Add
			□Renwve
			□Change
			□Add
			□Remove
		-	□Change
			□Add
			□Remove
			□Change
			□Add
			□Remove
			□Change
			Remove

MAILING ADDRESS: 217 N	N WESTMONTE DR 2018, ALT	AMONTE SPRINGS FL 3271	4
			
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Effective date, if other than the o	late of filing:	(option	al)
Effective date, if other than the of the an effective date is listed, the date must Note: If the date inserted in this bloodocument's effective date on the Department.	ck does not meet the applicable sta	of filing or more than 90 days after fil atutory filing requirements, this d	ing.) Pursuant to 605.0207 (3)(ate will not be listed as the
he record specifies a delayed effective ord is filed.	date, but not an effective time, at	12:01 a.m. on the earlier of: (b)	The 90th day after the
	2024	. 4	1
May 27th		1 Zi	
Dated May 27th		do bren	:

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Filing Fee: \$25.00

Typed or printed name of signee