

PU4 000 130507

(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:

*Wrong form*

Office Use Only



100333414121

10/16/13--01014--011 \*\*13.75

09/11/13--01024--028 \*\*30.00

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 OCT -7 PM 4:18

*Amend*

OCT 14 2013

D CUSHING

## COVER LETTER

**TO: Registration Section**  
**Division of Corporations**

**SUBJECT:** JCXP 4006 CORPORATION  
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:

KEVIN FISCHER  
Name of Person

OSCAR REY CPA, PA  
Firm/Company

1400 LINCOLN RD, STE 604  
Address

MIAMI BEACH, FL 33139  
City/State and Zip Code

KEVIN@OSCARREY.COM  
E-mail address: (to be used for future annual report notification)

For further information concerning this matter, please call:

KEVIN FISCHER at ( 305 ) 531-8518  
Name of Person Area Code Daytime Telephone Number

Enclosed is a check for the following amount:

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> \$25.00 Filing Fee | <input checked="" 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/COURIER ADDRESS:**  
Registration Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
STATE  
SECRETARY OF  
CORPORATIONS  
OCT 7 PM 1:18



FLORIDA DEPARTMENT OF STATE  
Division of Corporations

September 25, 2019

KEVIN FISCHER  
OSCAR REY CPA, PA  
1400 LINCOLN RD., STE 604  
MIAMI BEACH, FL 33139

SUBJECT: JCXP 4006 CORPORATION  
Ref. Number: P04000130507

We have received your document for JCXP 4006 CORPORATION and your check(s) totaling \$30.00. However, the enclosed document has not been filed and is being returned for the following correction(s):

The form you submitted is for a Limited Liability Company, but your entity is a Corporation. Please complete and return the enclosed blank form(s).

The Filing Fee for this corporation filing with a certificate of status is \$43.75. We will need an additional \$13.75.

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.

Diane Cushing  
Senior Section Administrator

Letter Number: 419A00019847

2019 OCT -7 PM 2:44

RECEIVED

**COVER LETTER**

TO: Amendment Section  
Division of Corporations

NAME OF CORPORATION: JCXP 4006 CORPORTATION

DOCUMENT NUMBER: P04000130507

The enclosed *Articles of Amendment* and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

KEVIN FISCHER

Name of Contact Person

OSCAR REY CPA

Firm/ Company

1400 LINCOLN ROAD, UNIT 604

Address

MIAMI BEACH, FL 33139

City/ State and Zip Code

KEVIN@OSCARREY.COM

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

For further information concerning this matter, please call:

KEVIN FISCHER

at ( 305 ) 531-8518

Name of Contact Person

Area Code & Daytime Telephone Number

Enclosed is a check for the following amount made payable to the Florida Department of State:

☐ \$35 Filing Fee

☐ \$43.75 Filing Fee &  
Certificate of Status

☒ \$43.75 Filing Fee &  
Certified Copy  
(Additional copy is  
enclosed)

☐ \$52.50 Filing Fee  
Certificate of Status  
Certified Copy  
(Additional Copy  
is enclosed)

**Mailing Address**

Amendment Section  
Division of Corporations  
P.O. Box 6327  
Tallahassee, FL 32314

**Street Address**

Amendment Section  
Division of Corporations  
Clifton Building  
2661 Executive Center Circle  
Tallahassee, FL 32301

FILED  
SECRETARY OF STATE  
DIVISION OF CORPORATIONS  
19 OCT -7 PM 4:18

Articles of Amendment  
to  
Articles of Incorporation  
of

JCXP CORPORATION

(Name of Corporation as currently filed with the Florida Dept. of State)

P04000130507

(Document Number of Corporation (if known))

Pursuant to the provisions of section 607.1006, Florida Statutes, this *Florida Profit Corporation* adopts the following amendment(s) to its Articles of Incorporation:

**A. If amending name, enter the new name of the corporation:**

The new name must be distinguishable and contain the word "corporation," "company," or "incorporated" or the abbreviation "Corp.," "Inc.," or "Co.," or the designation "Corp.," "Inc.," or "Co.". A professional corporation name must contain the word "chartered," "professional association," or the abbreviation "P.A."

**B. Enter new principal office address, if applicable:**

(Principal office address MUST BE A STREET ADDRESS)

3675 NORTH COUNTRY CLUB DRIVE

TOWER 4 APT. 1908

AVENTURA, FL 33180

**C. Enter new mailing address, if applicable:**

(Mailing address MAY BE A POST OFFICE BOX)

**D. If amending the registered agent and/or registered office address in Florida, enter the name of the new registered agent and/or the new registered office address:**

Name of New Registered Agent

(Florida street address)

New Registered Office Address:

(City)

Florida

(Zip Code)

**New Registered Agent's Signature, if changing Registered Agent:**

I hereby accept the appointment as registered agent. I am familiar with and accept the obligations of the position.

Signature of New Registered Agent, if changing

**If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:**

*(Attach additional sheets, if necessary)*

*Please note the officer/director title by the first letter of the office title:*

*P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.*

*Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.*

**Example:**

X Change                      PT              John Doe

X Remove                      V              Mike Jones

X Add                              SV              Sally Smith

Type of Action (Check One)	Title	Name	Address
1) <u>      </u> Change <u>  X  </u> Add <u>      </u> Remove	<u>VP</u>	<u>PAULA RUBIO</u>	<u>2122 MASSACHUSETTS AVE N</u> <u>WASHINGTON, DC 20008</u>
2) <u>  X  </u> Change <u>      </u> Add <u>      </u> Remove	<u>P</u>	<u>JUAN C RUBIO</u>	<u>3675 N COUNTRY CLUB DR</u> <u>TOWER 4 APT 1908</u> <u>AVENTURA, FL 33180</u>
3) <u>  X  </u> Change <u>      </u> Add <u>      </u> Remove	<u>VP</u>	<u>XIMENA SERPA</u>	<u>3675 N COUNTRY CLUB DR</u> <u>TOWER 4 APT 1908</u> <u>AVENTURA, FL 33180</u>
4) <u>      </u> Change <u>      </u> Add <u>      </u> Remove	<u>      </u>	<u>      </u>	<u>      </u> <u>      </u> <u>      </u>
5) <u>      </u> Change <u>      </u> Add <u>      </u> Remove	<u>      </u>	<u>      </u>	<u>      </u> <u>      </u> <u>      </u>
6) <u>      </u> Change <u>      </u> Add <u>      </u> Remove	<u>      </u>	<u>      </u>	<u>      </u> <u>      </u> <u>      </u>

**E. If amending or adding additional Articles, enter change(s) here:**

(Attach additional sheets, if necessary). (Be specific)

This image shows a single sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

**F. If an amendment provides for an exchange, reclassification, or cancellation of issued shares, provisions for implementing the amendment if not contained in the amendment itself:**

(if not applicable, indicate N/A)

[illegible]

The date of each amendment(s) adoption: 08/28/2019, if other than the date this document was signed.

Effective date if applicable: \_\_\_\_\_  
(no more than 90 days after amendment file date)

**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.

**Adoption of Amendment(s) (CHECK ONE)**

- ☐ The amendment(s) was/were adopted by the shareholders. The number of votes cast for the amendment(s) by the shareholders was/were sufficient for approval.
- ☐ The amendment(s) was/were approved by the shareholders through voting groups. *The following statement must be separately provided for each voting group entitled to vote separately on the amendment(s):*

"The number of votes cast for the amendment(s) was/were sufficient for approval

by \_\_\_\_\_."  
(voting group)

- ☐ The amendment(s) was/were adopted by the board of directors without shareholder action and shareholder action was not required.

- ☒ The amendment(s) was/were adopted by the incorporators without shareholder action and shareholder action was not required.

Dated 10/1/19

Signature \_\_\_\_\_

(By a director, president or other officer – if directors or officers have not been selected, by an incorporator – if in the hands of a receiver, trustee, or other court appointed fiduciary by that fiduciary)

Juan C Rubio

(Typed or printed name of person signing)

Pres.

(Title of person signing)